Disabilities in Roman Antiquity

DISPARATE BODIES
A CAPITE AD CALCEM

Edited by
CHRISTIAN LAES, C.F. GOODEY
& M. LYNN ROSE

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When the participants of the "A Capite ad Calcem" conference gathered at the University of Antwerp (UA) on the 5th and 6th of September 2011, they knew they were going to participate in a project which would lead to a book on a subject which had seldom been explored before. The speakers and themes had been carefully selected in order to have both a coherent conference and a book volume. The two days in Antwerp brought together the few scholars in the world who deal with disabilities in Roman Antiquity. In this small group, both the atmosphere and the exchange of ideas and opinions were excellent. For different reasons, Patricia Baker and Sarah Francis did not contribute to the final volume. Patricia Clark and Lisa Trentin did not participate at the conference, but were willing to offer contributions at a later stage.

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LIST OF ABBREVIATIONS

In order to keep to keep this volume as accessible as possible to readers who are not classicists or ancient historians, abbreviations have been kept to a strict minimum. Both in the chapters and in the index locorum, the names of the authors and the Latin title of their works are cited fully.

Latin inscriptions are quoted according to *L'Année Épigraphique* (2004) (Paris, 2007) pp. 699–705 and the *Epigraphische Datenbank Frankfurt* (*EDCS*) (http://www.manfredclauss.de).

Papyri are quoted according to the *Checklist of editions of Greek, Latin, Demotic and Coptic papyri, ostraca and tablets* (eds. J.F. Oates e.a.; Oakville Conn., 2001) (http://scriptorium.lib.duke.edu/papyrus/texts/clist.html).

P. Abinn.	The Abinnaeus Archive: Papers of a Roman Officer in the Reign of Constantius II
P. Fay.	Fayum Towns and their Papyri
CIL	Corpus Inscriptionum Latinarum
ILS	Inscriptiones Latinae Selectae
P. Oxy.	The Oxyrhynchus Papyri
P. Rein.	Les Papyrus Théodore Reinach
PSI	Papiri greci e latini
P. Vind. Tand.	Fünfunddreissig Wiener Papyri
SEG	Supplementum Epigraphicum Graecum

For the literary sources, we have made use of the following abbreviations:

CMG	Corpus Medicorum Graecorum
FGrHist	Die Fragmente der griechischen Historiker
K.	Galeni opera omnia. Ed. K.G. Kühn. 20 vol. (Leipzig, 1821–1833)
L.	Hippocrate. Oeuvres complètes. Ed. E. Littré. 10 vol. (Paris, 1839–1861)
PG	Patrologia Graeca
PL	Patrologia Latina
ThLL	Thesaurus Linguae Latinae (Leipzig, 1900–)

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Lisa Trentin, Wilfried Laurier University (Ontario). Lisa Trentin's current research project explores the intersection of ancient (Roman) history and disability studies. Specifically, her research explores 'disabling imagery'. Her goal is to engage disability studies perspectives to interrogate how the

Romans constructed certain bodies as ‘abnormal’ or physically deviant, connecting both written and visual materials. Lisa Trentin is currently exploring the topic of visual impairment in the ancient Roman world.

APPROACHING DISABILITIES *A CAPITE AD CALCEM*: HIDDEN THEMES IN ROMAN ANTIQUITY

Christian Laes, C.F. Goodey and M. Lynn Rose

1. A New Subject?

We live in an imperfect world, and there is not too much we can change about that. That is why St Augustine was particularly displeased with Pelagius' heretical theology, which laid too much stress on people's good will as the means to eternal salvation. In his bitter controversy with Julian of Eclanum, undoubtedly the Pelagian opponent he feared most, he emphatically reminds us about the misery of the world and its necessary connection with original sin, an aspect totally denied by the all too optimistic Pelagians.[1]

> Necesse est enim ut doleatis, quando quid respondeatis non invenitis, et tam pravam sententiam mutare non vultis, quae vos inevitabili necessitate compellit in loco tantae beatitudinis et pulchritudinis constituere caecos, luscos, lippos, surdos, mutos, claudos, deformes, distortos, tineosos, leprosos, paralyticos, epilepticos, et aliis diversis generibus vitiosos, atque aliquando etiam nimia foeditate et membrorum horribili novitate monstruosos. Quid dicam de vitiis animorum, quibus sunt quidam natura libidinosi, quidam iracundi, quidam meticulosi, quidam obliviosi, quidam tardicordes, quidam excordes atque ita fatui, ut malit homo cum quibusdam pecoribus, quam cum talibus hominibus vivere? Adde gemitus parientium, fletusque nascentium, cruciatus dolentium, languentium labores, tormenta multa morientium, et pericula multo plura viventium.

> Surely you must feel pain and suffering, since you do not find what to answer and since you do not want to change your depraved opinion which inevitably compels you to place in your oh so beautiful world the blind, the one-eyed, the cross-eyed, the deaf, the mute, the lame, the deformed, the distorted, the wormy, the leprous, the paralysed, the epileptic and those who are deficient in various other ways—some even look monstrous to us, because of their extreme ugliness and the horrible strangeness of their limbs. And what shall I say about the faults of souls, which make some lustful by nature, others short-tempered, others forgetful, some slow of mind, and others out of their mind and so foolish

[1] See Kellenberger (2011b) on Augustine and mental impairment.

> that a human being would rather live with cattle than with that sort of human beings. To all this, you have to add the woes of women in childbed, the crying of newborns, the torments of those who suffer, the labours of the feeble, agonies suffered when dying, and so much more dangers for those who live.
> (Augustine, *Contra Secundam Iuliani Responsionem Opus Imperfectum* 6, 16)

This relentless wordlist is familiar to the twenty-first century reader: a file of disabilities from head to foot with regard to physical aspects, while mental impairment is presented in a separate-but-equal enumeration. Augustine's outrage ends with an assertion that, in its own way, is also modern: that there is something that qualifies as unjustifiable suffering, and to which we should not shut our eyes.

Augustine's list raises a question about our title, which refers to impaired bodies. But, like Augustine's text, our book also discusses what we take to be impaired minds. Yet if we dwell for a moment on how foreign is the country that we call the past, rather than on cross-historical themes, we can say that our title remains legitimate: to talk about separate mental and physical differences is modern (post-Cartesian) and retrospective.[2] Certainly, for the medical doctors of Antiquity such as Galen and Celsus, mental states are organic aspects of bodily disposition. The body, broadly speaking, has primacy: the ultimate importance of mental states in medicine is as indicators of the health of physical ones, particularly (but not exclusively) that of the brain. Moreover, mental impairments are on the whole dispositional: they do not define personhood in the modern, Lockean sense, as a life-to-death state. Nevertheless, by the same token, mental states cannot be excluded from our discussion.

Be that as it may, Augustine's systematic list fits into a long tradition: from Mesopotamian and Egyptian diagnostic handbooks of the second and the beginning of the first millennium BCE[3] to the proverbial Latin *a capite ad calcem*—from head to foot.[4] As such, and without pre-empting the question of how far one may match today's categories against those of the past, this list can serve as a leitmotiv for the present book on disabilities in Roman Antiquity. Starting at the head, Chris F. Goodey and Lynn Rose describe how

2 See Goodey (2011).

3 The Mesopotamian handbook from about 1000 BCE is a compilation which goes back to a much older tradition. See Heessel (2000) and Kellenberger (2011a) 27. The Edwin Smith Papyrus, an ancient Egyptian medical text, is the oldest known surgical treatise on trauma, and dates from 1500 BCE. See Breasted (1991).

4 The expression occurs with Vitruvius, *De architectura* 10, 15, 6 (*a capite … ad imam calcem*) but became proverbial with Erasmus, *Adagia* 137 (*a capite usque ad calcem*).

mental and personal disorders were satirised and, in doing so, attempt to undermine modern categorisations of disability. From an historical point of view, also the classification of mental disorders or mental distress might prove problematic, as is clear from the contribution by Patricia Clark and Lynn Rose on pyschiatric disability in Galen. In the last chapter on the head, Danielle Gourevitch discusses the subject of alcoholism. Lisa Trentin then focuses on the eyes in a chapter which takes into account both literary and artistic evidence. The eyes and the ears feature in the miracle stories analysed by Cornelia Horn. Speech and communication variances being in ancient opinion largely a matter of mouth and tongue, stuttering and other speech impairments are treated next, by Christian Laes. Then follow two chapters on bodies viewed as strange, frightening, bizarre, or even monstrous—both in the case of newborns (Lutz Alexander Graumann) and of adults (Bert Gevaert). Legs and limbs are closely connected with mobility problems, a subject examined by Évelyne Samama, who deals with the ambivalent attitudes towards war veterans on the one hand and the heroification of the war-wounded king Philip II on the other. Archaeological evidence and artefacts are far more difficult to file into categories. Emma-Jayne Graham looks at the post-mortem treatment of bodies which were for some reason or another viewed as strange or impaired and thus buried separately, while Alexandre G. Mitchell's contribution on artefacts confronts us with a range of possible reactions towards impairment which again run counter to many of our modern sensibilities. Taken together, these chapters offer an exciting and new overview of a subject rarely broached before: disability in Roman Antiquity.

2. Disability History: Not a New Subject

While these introductory words are meant as a teaser for classicists and ancient historians and for disability historians researching other periods, as well as for disability activists, advocates and anyone with an interest in the subject, our introductory words need some qualification if they are to appeal rather than repel. First of all, it does seem odd that this could be the very first book devoted exclusively to the subject of disability in the ancient Roman world, especially in these times of ever-expanding scholarship and bibliographies. Studies on disability are mostly focused on the Modern Age;[5]

[5] Symptomatically, a special issue of the journal *Paedagogica Historica* dealing with Children and Youth at Risk, does not mention anything before the beginning of the the sixteenth century. See e.g. Lohmann, Mayer (2009) and Dekker (2009).

only very recently, the Middle Ages have started to make up the arrears.[6] For ancient history, we now have one book-length synthesis for Greek Antiquity, as well as one introduction to the Graeco-Roman world as a whole, but not a single book which specifically deals with the Roman period.[7]

Moreover, disability history is hardly a brand new branch on the tree of history: indeed, it has a tradition of at least some decades by now, and has been institutionalised in several countries. Over the years it has developed its own nuanced methodology and terminology, especially in literary criticism, by comparison with which the *a capite ad calcem* approach may appear unsophisticated. In some sense or other, both doctors and historians of medicine—the two categories often overlap—have long paid attention to physical and mental 'abnormality,' as they have been trained to categorise it.[8] It was exactly this medicalised approach that was challenged in the United States and the United Kingdom in the 1980s, when disability studies emerged as a new, interdisciplinary academic field. The earliest scholars in this field, many of them social scientists, studied the complex interactions among cultural values, social organisation, public policy and professional practice regarding people with impairments.

In the 1990s, disability studies developed a new disability history, focused on concepts of otherness. These studies viewed disability on the model of gender, race or ethnicity, categories which had traditionally enabled the white, non-disabled male to confirm his dominance and superiority over others who did not fit into them. As such, disability studies has been able to contribute to our understanding of the way western cultures constructed hierarchy, social order and (as 'progress') the process of social change. The field of disability studies is in fact an interaction among academics, activists, advocates and artists, and while the roles often overlap, there is never perfect agreement in this population. Disability studies scholars who have published

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6 See Metzler (2006); Turner, Vandeventer Pearman (2010) and Nolte (2011). Kuuliala (2011) offers a judicious overview of the subject.

7 Rose (2003) and Garland (2010), a second edition of a book which appeared for the first time in 1995. For articles offering a *status quaestionis* for Roman Antiquity, see Laes (2008) and (2012); Stahl (2011). Kelley (2007) is a very informative chapter on the subject for Greek and Roman Antiquity.

8 Examples of such approaches for Antiquity include the book by the ophthalmologist Esser (1961) and the otologist Werner (1932). Of courses, these approaches suffer somehow from the difficulty of 'retrospective diagnosis', the urge to transfer our own diagnostical tools to a world which did not necessarily have the same categories or the accurate descriptions which would enable us to make such diagnosis. On this particular problem, see Leven (2004) and Graumann in this volume.

literary criticism, for example, have been challenged for being too text-based, thus failing to take into account the lived experience and complexity of disability, and for using an obscure, quasi-mystical jargon that makes their work inaccessible except to each other. Current disability history, too, takes into account Foucauldian structures of power and oppression, often at the cost of narrating anything resembling the reality of everyday experience.[9] These various waves of disability studies, whatever their differences and drawbacks, have made historians aware that disability is a concept which may very well have been constructed differently in different periods and cultures. They have also changed the vocabulary used in approaching the subject: although intertwined, one should draw a distinction between disability, which is essentially a social and cultural construct, and impairment, which points to physiological and biological characteristics.[10]

3. Combining the Old and the New

For the reader who may object that the *a capite ad calcem* approach does not take into account all the new developments in the history of disability, this collection of essays represents fresh thought, new models of inquiry, and ongoing arguments even between authors. In short, it is a dynamic scholarly conversation. Nevertheless, we must also offer the following apologia.

First, given the present state of research, this was simply the first work that had to be done. In order to move forward, ancient historians embarking upon disability as concept and reality need a collection of known instances of people who were blind, speech-impaired, hindered in their mobility etc. Indeed, the ponderous scholarly exercise of going *ad fontes*—meticulously reading and collecting the sources—has turned up new and unexpected schemata. Case histories allowed us to (re)consider definitions of disability in the Roman world. Hence, the contributors of this volume have focused on a fundamental task: how can Roman understandings of mental and bodily

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[9] Handbooks on 'modern' disability studies include Albrecht, Seelman, Bury (2001); Longmore, Umansky (2001); Jones, Webster (2010). Excellent overviews which also embrace the rich tradition of non-Anglo Saxon studies on the subject include Förhammar, Nelson (2004) and van Trigt (2011).

[10] Neubert, Cloerkes (1994) point to the thin line between impairment and disease in various cultures and across various periods of history. Also Metzler (2006) scrupulously discerns between disability and impairment. Cf. the motto *Behindert ist man nicht, Behindert wird man*—a slogan used by German disability activists, quoted in Kellenberger (2011a) 17–18.

conditions be accessed and collected? Ultimately this will help modern scholarship on the topic to employ more precise terms and understandings of difference.

Secondly, our choice does indeed reveal a rejection of strong constructionism—a theoretical and practical disapproval based on the belief that we are all human beings, sharing certain corporal realities over different cultures and times. Strong constructionism posits that 'it is all a matter of the way you want to perceive things.' See for example the story about how it would be if everyone were blind in José Saramago's 1995 novel *Ensaio sobre a cegueira*, "Essay on Blindness" and John Varley's short story "The Persistence of Vision," or think of Katherine Dunn's 1989 cult novel *Geek Love*, whose world is populated by artificially created 'freaks'. Disability is indeed "an umbrella term (…) a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives," as the World Health Organisation has famously claimed.[11] Yet forcing through this thesis—that the perception of your physical characteristics will determine your quality of life—is at first sight bizarre. Indeed, we do not have to go back that far in human memory for concrete examples; in our own lifetimes, most of us remember societies in which having a non-European appearance or a black skin dramatically inhibited the way one's interactions with other people and with the mechanisms of society as a whole. The same could be said about being a woman, or coming out as a homosexual. And the definition certainly fits what are currently called social handicaps. Baldness, persistent blushing and excessive sweating are seen, in the modern West, as conditions with a range of possible reactions, from acceptance to disguise. Still, it would be as bizarre to include a chapter on baldness or blushing—let alone on black people—in a book focusing on disability in the modern United States, as it would be to include chapters on women and homosexuals in Roman antiquity. In other words—and this includes the practical side of our disapproval of strong constructionism—vagueness and variance characterise the definitions of disability in Antiquity, but that does not preclude the possibility that similarities may be discovered across time and place. On the one hand one does not just assume the existence of such similarities; on the other hand one must certainly allow that it is a possibility. Thus,

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[11] Seen on http://www.who.int/topics/disabilities/en. The first ever *World report on disability*, produced jointly by WHO and the World Bank in 2011, suggests that more than a billion people in the world today experience disability. Seen on http://www.who.int/disabilities/world_report/2011/en/index.html.

for example, the study of sexuality and homosexuality has proved to be a fruitful branch of ancient history, even though ancient people did not denote sexuality in the same terms that are used twenty centuries later. Obviously, ancient languages had words (with adjectives predominating over nouns and labels) to express degrees of blindness, deafness, and the physical or mental anomalies they perceived; and by and large, people in the ancient past would have understood that if someone had a pronounced limp or lacked arms, this was not the way a human body usually functioned.[12] Ancient definitions of handicaps do not exist: the passage which brings us nearest is a chapter by Gellius, who was famously preoccupied with etymology and meaning of words. In the context of the sale of slaves, Gellius distinguishes between *morbus* (illness) and *vitium* (defect). To him, the decisive demarcation line is the ability to perform work, not the permanent or the temporary character of the symptoms. Hence, stuttering slaves or myopics are not to be considered as *morbosi*; those with a wounded limb or deaf-mutes are. Depending on the tasks to be performed, the latter impairments would have hindered their ability to work.[13]

Our third apologia is that the 'traditional', medicalised approach of categorising 'abnormalities' as a basis for collecting sources does not exclude the possibility of discovering significant differences in the way impairment was culturally viewed or assessed; nor indeed does it exclude the possibility of integrating within this approach the tools of new disability studies such as power, social class, religious discourse, etc. In fact, all the chapters in the present book prove quite the contrary. Intellectual difference especially seems to have been linked with both physical appearance and social deviance, appearing early on with Thersites, the notoriously repulsive opponent of the aristocratic leaders in the Homeric *Ilias*. Here we get the physiognomic and intellectual stigmatisation of a rebel who dares to speak out: the paradigm of Thersites was repeated over and over again, and into early modern times. Thus the categorisation of what we would call 'intellectual' disability remains a very difficult matter throughout Antiquity, and is often connected with issues of power, temperance and social station. There seems to have been an increasing awareness of this in the first and second centuries CE, fundamentally intertwined with the discourse of the Second Sophistic Movement. In societies where the average consumption of alcohol was

12 For useful glossaries or discussions on ancient terminology and classification, see Bien (1997) 27–37; Cuny-Le Callet (2005) 43–93; Laes (2008) 89–91; Garland (2010) 183–185.

13 Gellius, *Noctes Atticae* 4, 2.

considerable to say the least, it might theoretically be the case that those unable to tolerate alcohol were in a way considered disabled or 'not real men'. Yet, ancient society focused a lot on temperance, and while they never conceptualised the problem of heavy drinking as 'alcoholism', ancient writers did mention cases of overindulgence which were considered as strange or bizarre, or were even used as a tool of stigmatisation. If a ruler transgressed the standards of sober conduct by drinking too much, his overindulgence proved his incapacity to rule.

This brings us to the matter of social class, which is pre-eminent in many contributions. Being blind or deaf or having what might today be considered an intellectual impairment would not have held so much significance for rural societies, less preoccupied by issues such as efficiency and speed. After all, such people could manage very well in their own secure rural environment and community. In the case of the elite, however, the ideal of being able to act as a responsible ruler and member of the ruling class might have been flawed by significant intellectual impairment. The same goes for stutterering and other speech difficulties, which may have inhibited public speaking, a necessity for the responsible ruling elite. In the case of mobility problems, our literary sources (written, of course, by the responsible ruling elite) suggest that a mobility limitation need not be limiting at all. The wealthy were supported or even carried by servants and slaves, while serious mobility issues could cause the poor or middling classes to be quite unfit for most work in their community (with some exceptions as pottery). Hence, one encounters in one and the same society the heroification of a physically impaired king and the admiration of war veterans, but also the occasional despise for the very same veterans who were considered deformed or disfigured.[14]

The subject of religion also turns up in various chapters: in Cornelia Horn's contribution where the possible impact of Christianity is discussed, in discussions on a priest's ability to perform his liturgical duties (the question of purity and contamination), but mainly in the two chapters on monsters. Here, religious awe combined with fear in politically troublesome times caused people deemed to be defective, both newborn and adult, to be viewed as ultimate others. In different circumstances, the very same people could be cherished or at most viewed with mild mockery. The last two chapters succeed in opening up subjects often considered hardly relevant or even tangible. The motives which inspired a local community to exclude some of its members as disabled others can be revealed by looking at burial practices:

14 Laes (2011).

here we get at least a glimpse of what literary sources never tell us. Finally, the contribution on artefacts makes it utterly clear how far discerning disability was really related to the eye of the powerful beholder, who might stare at the disabled other in the form of an object of art to be mildly ridiculed—thus serving in the end to confirm their own superior social identity.

4. Prospects for Further Investigation into Ancient Disability

This collection of essays by no means claims to be the definitive approach to the subject. It contributes, we hope, to the growing body of work on disability in premoden cultures. It does seem appropriate, therefore, to highlight other research paths which might follow on from the present study.

In an unpublished paper Patricia Baker has examined how a person with a mobility impairment would have negotiated the treacherous streets of Pompeii. Undoubtedly, on a similar basis of archaeological evidence and reasonable conjecture, further attempts of this kind might be made to tell the history of disability from the side of the subjects involved. The exercise requires imagination. In a book remarkable for its erudition, the Swiss pastor Edgar Kellenberger focuses on agency and on the way people labelled as 'intellectually disabled' experience the world around them.[15] His discussion on the teaching of the catechism to such teenagers and on how they experience the gospel stories of the Christian scriptures and the liturgy of the Christian tradition in particular might help scholars of disability studies to understand how people of earlier periods and cultures experienced sacrifice and other sacred ritual. True, such thought-experiment demands not only imagination but also a suspension of disbelief, as it necessitates transferring the intangible (feelings and emotions) to unfamiliar times and regions; but the exercise could be a rewarding starting point.

It is, in all cases, preferable to work with primary sources, that is, records that disabled people have left, rather than the observations that non-disabled people have made about disabled people. The historian must be aware of two significant caveats: first, until only very recently, most records contain internalised discriminatory judgement. Second, there is a nearly complete absence of such source material from the ancient world, and what might exist is terribly vulnerable to misinterpretation. Still, twentieth-century memoirs

[15] See especially Kellenberger (2011a) 39–53.

such as the poignant *Lost in a Desert World* offer an experimental starting point. In this autobiography, Roland Johnson narrates the transformation of his life from systemic family dysfunction and institutionalisation with its accompanying sexual abuse and humiliation to his adulthood of activism and advocay, culminating in the foundation of 'Speaking for Ourselves', a civil rights group directed and run by people deemed 'intellectually' disabled.[16]

The Roman world, from the late Republic on, was at the least bilingual and bicultural, but focusing on Greek and Latin does not do justice to the diversity of cultures and languages which existed, varying from one time and place to another, throughout the Imperium Romanum. This multiculturalism is especially apparent and important in western Late Antiquity, the periodisation of which extends to the middle of the sixth century and beyond, depending on location. In the present volume, we have included non-Graeco-Roman cultures to the extent that they are mentioned by Greek and Roman ancient authors. Although major work on disability in biblical literature has been carried out by other scholars, we have included instances in which reception of both Hebrew and Christian scriptures offer glimpses into the history of disability.[17] The story of the possessed man who lived in utter poverty castigating himself at gravesides, having repeatedly broken the chains with which others had tied him, allows us a fleeting glimpse into one ancient perception of what would now be labelled mental illness. Retrospective diagnosis and socio-religious context aside, the story became a stock item for Greek and Latin patristic writers on the theme of possession. In the same way, the Hebrew tradition concerning Moses' speech difficulties—regardless of any given narrator's intention of portraying him with halting speech, or of how his difficulties with speech would be related today—became part and parcel of the Graeco-Roman patristic heritage, and is dealt with as such in the contribution by Christian Laes.[18] Crossing the borders of the Roman Empire to east and to the west—Ethiopian or West Asian cultures, for example—is also fruitful, and in this volume, the contribution

16 Johnson, born in 1936, was African-American; see also the memoir of John Able (2004), a white man born in 1939, for his description of his progress from an institution to an independent life in the UK. Modern memoirs that feature disabilities are plentiful; the trope of disability is, in some, framed as a tragedy, in others, such as Linton (2006) as an explicity political embodiment.

17 See Holden (1991); Eisland (1995); Abrams (1998); Schipper (2006).

18 Possessed man at gravesides: Vulgata *Marcus* 5:1–5. See Kellenberger (2011a) 15 and 55 on the use of biblical passages; Kellenberger (2011a) 67–68 on commentaries on the Hebrew scriptures.

by Cornelia Horn provides examples of what might be discovered in oriental sources when they are read in light of disability studies rather than in the light of the medicalised model.

Possible continuities from Antiquity can be taken into account, as long as we deal with them cautiously. St Jerome mentions the custom of sending children with visible physical disabilities and differences to monasteries: the custom, whether it survived the fall of the Roman western empire or was reinvented, appears in the records of a convent of an eighteenth-century Alsatian nun.[19] At a conceptual and diagnostic level, both the ancient science of physiognomics and the second-century medical science of Galen are taken up in Western Europe, an early example being Michael Psellos' eleventh-century treatise "On How Some People Become Clever and Others Foolish".[20] In later medieval and Renaissance reinterpretations, Galenism remained the main inspiration behind practical medicine, including descriptions of disability (albeit sometimes retrospectively or by coincidence), until the early eighteenth century. And in our expansion of disability history to include non-western Antiquity, every historian of disabilities will be grateful to M. Miles, who has made his exhaustive knowledge of disability in West and South Asia, from Antiquity to the present, readily available online.[21] The 2006 *Encyclopaedia of Disability* is another starting point for the historian interested in going beyond conventional cultural and chronological borders. The five volumes of the enyclopaedia address a dizzying array of disability topics, from prehistory to the present, including areas that as of 2006 had yet to be tapped for information about disability. The 525-page fifth volume is composed of literary and non-literary primary source material, beginning with Sumerian proverbs from the third millennium BCE, including several potentially valuable primary sources that remain uninterpreted through the lens of disability studies.[22]

Anthropology, by now more accustomed to avoiding Eurocentrism than medical history is to avoiding retrospective diagnosis, may be another reservoir of information. Websites as well as published works on disability in non-Western cultures have pointed to the array of possibilities of interpretation

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19 Jerome, *Epistulae* 130, 6, 5. For the endurance of the tradition, see Kellenberger (2011a) 114–116, referring to the monk Hermannus Contractus in the eleventh century, or a nun's monastery in Sélestat.

20 O'Meara (ed.) 2, 88–92; see Volk (1990) 120–124.

21 Miles (2008). Also seen on http://www.enablement.nl/pdf/MM-PubsEnablmt.pdf for a full list of Miles' publications. M. Ghaly (2010) has made significant inroads in examining disability in early Islamic history.

22 Albrecht (2006).

one might encounter. A Sri Lankan professor of classics, D.P.M. Weerakkody has contributed a lot to our knowledge about the way blind people were treated in Pre-Modern South Asia.[23] More than once, anthropological research results invite us to reconsider our own presumptions. In contemporary East African Molo culture, for example, children deemed intellectually impaired may also be labelled 'worthless' or 'depraved'—and exactly the same the word is also used for adults who do not perform their social duties, who drink too much or remain unmarried and childless. The disability historian will be quick to notice that children are not denounced in these terms if they succeed in behaving respectfully and performing manual tasks: what we in the West would measure as their intellecual impairment is much less disabling than the disability that is deviant social behaviour.[24] Anthropology also has the potential to teach us a lot about the role of disabled people within various family systems. In the premodern world, with its lack of institutions the usual place of residence for childern with disabilities was the household. We encounter a range of human reactions there, from loving affection to concealment or even elimination, from the intuitive to that which has been imposed externally by social rules and customs.[25] In this volume, the contribution by Emma-Jayne Graham points to the possibilities of such research on local communities.

Expanding our breadth of knowledge does not of course mean abandoning the scepticism due from every historian, or the need to situate oneself within the dialogue between present and past. It is not clear how far the modern historian's eagerness to cite inevitably sparse historical primary sources on infanticide may stem from equally negative modern attitudes, in which sporadic moves towards full social inclusion for some of the living are counterbalanced by a prevailing medical model of pre-natal diagnosis and termination.[26]

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[23] Weerakkody (2008).

[24] Kellenberger (2011a) 147–149.

[25] Kellenberger (2011 a) 122 on concealing disability in twentieth-century Switzerland. Cf. the Lydian king Croesus—eventually proven wrong in so many ways by the wiser Greeks—who says of his mute son that he does not count him as a son: Herodotus, *Historiae* 1, 38. See Laes (2008) 85–86; Rose (2003) 40–61.

[26] Kellenberger (2011 a) 76–77 mentions the attempt at burying a socially deviant girl alive in a South-Anatolian village in 2010. Similar brutal cases exist in the West as well; see Davis (1995). On *Pädizid* (killing children at a later age) being historically much rarer than *Infantizid*, see Laes (2008) 97. For a case of a family council deciding the elimination of a 34-year-old twin, see the apocryphal *Acta Joannis* 56; see Laes (2008) 110. There is, on the other hand, palaeopathological evidence indicating that people with severe congenital disabilities were sometimes painstakingly included by nomadic groups: see Berkson (2006). For some

Studies of disability in the ancient world have demonstrated the dearth of source material: all the more reason for us to hold up for careful scrutiny such cross-cultural perceptions as we are able to provide. Yet, we would suggest, this is grounds for optimism. The criteria within which disability is narrated do not limit even further our meagre sources, but open up new and wider possibilities of interpretation.

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discussion of the lack of reliable source materials about the normativity or prevalence of infanticide itself, even among the notoriously practical Classical Spartans, see Rose (2003) 29–49. In modern times there are extremes that depend on state and class; for an account of a significantly disabled baby kept alive at staggering emotional and financial cost, see the 1994 documentary *Little Man* by Nicole Conn. The blog on updates about the child and family, along with additinoal resources, can be seen on http://www.littlemanthemovie.com/blog/ (seen August 2012). See also Hubbard (forthcoming 2013).

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MENTAL STATES, BODILY DISPOSITIONS AND TABLE MANNERS: A GUIDE TO READING 'INTELLECTUAL' DISABILITY FROM HOMER TO LATE ANTIQUITY

C.F. Goodey and M. Lynn Rose

1. Introduction

When, as historians of the ancient past, we try to decipher or classify the medical and psychological descriptors of disparate human characteristics, we find that we are clumsy foreigners, disoriented and barely literate. We only become nimble on the terrain—more familiar to us—of methodologies of discrimination: it is political, social and economic status, as always, that shapes categorisation.

Disparate embodiment was perceived in the Graeco-Roman world more in terms of one's station in life, represented ritually by one's place at the dinner table, than by the medical categorisation of disability of twenty-first century perception. The writings of the early imperial Roman satirists Juvenal, Martial and Petronius provide a vantage point from which to observe embodied disparity, especially when put side-by-side with their contemporaries (for our purposes, Pliny and Suetonius) and especially in terms of Roman receptions of Greek perceptions. These first- and second-century Latin works offer plentiful references to physical markings of disparity and to the framework of concepts expressed and exaggerated in the portrayal of satirical bodily disparity. Underlying concepts of disparity are also seen in Greek literature that preceded and followed the Latin satirists. If we imagine a simple timeline drawn from left to right, the Latin writings of the early imperial period mark the centre, and on each side of our focal point are two earlier and two later markers, all Greek. On the far left are the Homeric writings, followed by the fourth-century philosophical works. The right of the Latin focal point is marked on the timeline by two later points: the Greek philosophical compilations of the middle Roman Empire, and, finally, on the far right, the writings of the pagan Themistius, who was in the service of the Christian imperial court in the early fifth century. It comes as no surprise that we find both continuity and change regarding the perception of the mind/body

system between the eighth century BCE and the fifth century CE. Where continuity is concerned, the derision that any given term of insult evokes, as well as the broader ancient cultural context of disparity, rests on the underpinnings of the traditional Greek portrayal of the body and mind as one inseparable system. Therefore, we begin this historical overview with the Homeric writings, in which the φρήν, or intellectual complex located roughly in one's torso, could go awry and wreak havoc, causing temporary or permanent disparity. We then note that no major discernible conceptual shift had taken place in the Greek philosophical writings of the fourth century BCE. Next, we show that the conditions of parity and disparity were formed by flexible criteria, as seen clearly in Roman satire. Satire, in general, magnifies the amplitude of any given issue, leveraging a large amount of mockery from a seemingly small situation. Petronius, in his *Satyricon*, for example, evokes economic corruption, obsequiousness, and boorishness by referring to a natural defect, and he uses the same term for battle-ravaged legs. Eight centuries earlier, in the *Iliad*, Thersites was mocked for being mere infantry (a 'private,' as the English term it—evoking the ἰδιοτης who lacks public status), had been given bandy legs and stooped shoulders along with clumsy social behaviour, all of which went with his reluctance to follow his superiors into battle and justified his beating, to the amusement of his fellow soldiers.[1] Odysseus's wiliness was enhanced by the naïveté of his sidekick Elpenor ("a young man, not too brave in war and not entirely sound of mind"), a crewman who, in crude slapstick, after being intoxicated, fell to his death from the roof on which he was sleeping.[2] In the case of both Thersites and Elpenor, only context reveals the meaning of the defect. By the same token, any given defect of body, behaviour or cutlery mirrors social context.

A century after Petronius had died, Galen's second-century treatises codify the concept of mind/body unity in scientific terms, explaining intellectual and moral defects as organic to the brain and body, and the second- to third-century Alexander of Aphrodisias codified the concept of the ἰδιοτης and its relation to that of natural impairment in such a way that only he and his circle measured up in every way. Indeed, in all cases, the criteria of the literate elite—and, often, only of one's own coterie within it—served as the standard measurement, determining the degree of everyone else's political, social, or

1 Homer, *Iliad* 2, 211–320. Here and throughout, we attribute the *Iliad* and *Odyssey* to a single author, Homer, as a matter of convention.

2 Homer, *Odyssey* 10, 552–560. See especially 552–553 for an assessment of Elpenor's behaviour.

economic parity in relation to their own. Themistius, in the fifth century CE, suggests some codification of pathology, in which the diagnosis begins to have a life of its own outside of its socio-economic context. Themistius, it should be noted, writes in an imperial setting that would have been unrecognisable to any inhabitant of the earlier Roman Empire; the Graeco-Roman world of late antiquity was melting into the medieval world in the west and the Byzantine Empire in the east.

2. Historiographical Issues

Terminology is slippery, especially paired terms, because pairing suggests a binary perspective that is a characteristic of the modern world, not the ancient. We use the terms parity and disparity as well as ability and disability, among other paired, single, outdated and jarring terms. We refrain from typographical segregation of inappropriate words such as idiocy or mental retardation when such terms are used in a context where they were acceptable (the term mental retardation in the 1970s, for example, was standard, as was idiocy earlier in the twentieth century). Retrospective diagnosis, furthermore, flaws historical investigation. Even the best-intended terminology can carry the suggestion of modern medical assumptions. The term disability comes with a set of modern assumptions including the image of a medical infrastructure, and this conjecture can lead to hollow historical questions. The word disparate is more accurate because it suggests a range of differences of degrees in parity, and does not necessitate an assumed form of normalcy. In other words, (dis)parity can be relational while disability assumes a binary concept in which ability—the nondisabled and synchronised body and mind—is standard. Still, we must be careful to avoid simply replacing the old words with the new. A person with an amputated limb, for example, is disabled within the modern medical paradigm, but the same person may not have been considered disparate by ancient standards on the basis of the missing limb; he may have had parity within his socio-economic station.

It is, furthermore, not fruitful to 'add and stir' people who by modern standards might be deemed disabled, such as our theoretical amputee, into the record of societies that predated both statistical measurement and the conceptual split between mind and body, as well as other assumptions that go into the modern notion of disability. This applies particularly to what is now called intellectual disability. To ask, as popular science columns do *ad nauseam*, 'Was Mozart/Spinoza/Newton (et al.) autistic?' is not useful.

We must not exhume dead people and diagnose them with a condition that was invented long after they died. The interdisciplinary field of disability studies offers an important element to social history by recognising that disability is not merely an overlooked category of human history, but also a shifting category whose parameters vary over space and time. Until recently, the study of physical disability has dominated disability studies, while the historical study of people with psychiatric and intellectual disability labels has lagged behind.[3] Writing presciently in 1979, Seymour Sarason and John Doris described intellectual disability as a 'window through which to study our society' and pointed out that few people had taken advantage of the window.[4] This had not changed much by 1992, when Nora Groce, writing about the oral history of people with intellectual disabilities, noted that 'little more than passing reference is usually given to this large group of human beings'.[5] Critical histories of intellectual disability in the U.S. began appearing by the end of the twentieth century, such as James Trent's 1994 *Inventing the Feeble Mind: A History of Mental Retardation in the United States*.[6]

With few exceptions, historians have focused on the United States and the recent past, and only very recently has scholarship begun to restore people with mental disabilities of any kind to pre-modern social history, thus beginning to correct the imbalance in disability studies. As the best of this scholarship shows, an examination of this topic goes beyond merely adding information about any given era or society; disability studies at its best deepens and alters our understanding of the society under investigation. At the same time, any study of intellectual disability—this chapter included—reveals the cultural assumptions of the investigators. Up to the end of the 1970s, as Sarason and Doris point out, the narrative of intellectual disability was presentist and isolated, because the urgent focus of the people who

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[3] Two papers presented at the 2002 meeting of the Society for Disability Studies generated much discussion about this lag: Heather Macduffie presented 'Spivak and Subalternality, or: Can the Self-Advocate Speak?' on 7 June, 2002, and James Trent presented 'Disability Stratification: Past Structures and Present Boundaries' on 8 June at the Society for Disability Studies Meeting, Oakland, CA, 2002. On 3 June, 2010, the plenary session for the twenty-third annual conference of the Society for Disability Studies, 'Disability and Human Rights: The Capabilities Approach and Occupational Justice' held in Philadelphia, PA, focused on intellectual disability. The twenty-fifth conference, held in Denver, CO, was replete with discussion, sessions and performances by people with intellectual and psychiatric disabilities, as well as people diagnosed with autism and other 'spectrum' behaviors.

[4] Sarason, Doris (1979) 19.

[5] Groce (1992) 176.

[6] See also, more recently, McDonagh (2008).

wrote about it was that of bettering the life of the individual. 'Such efforts can only be applauded,' continue Sarason and Doris, 'but we must recognize that such a concentration tends to divert attention away from the larger social context.'[7]

The little twentieth-century academic writing that exists about ancient mental disabilities comes from the perspective of educational or psychological science rather than classical history, and illustrates all too well that any study of intellectual disability is framed by the mores of whatever era in which it is written. Martin Barr, in his 1904 *Mental Defectives*, tells us that in ancient times, 'the awful appellation "idiot" not only inspired horror and disgust, but meant, for the unfortunate, a forfeiture of all human rights and privileges.'[8] Oliver Kolstoe and Roger Frey, in a 1965 teaching manual, call early Greece an 'era of extermination,' especially among the Spartans, 'where the concern of the populace was to develop a citizenry free of defective people.'[9] Greece and Rome sometimes collapse into one vague ancient society, as in a 1976 introduction to a collection of contemporary documents on mental retardation, in which the authors begin with a survey of the history of mental retardation before the eighteenth century: 'In ancient Greece and Rome, the mentally handicapped were treated as objects of scorn and persecution … and in ancient Rome it is alleged that children who were blind or deaf or mentally dull were thrown into the Tiber by their parents to relieve themselves of the burden of support.'[10] In the long-time standard historical overview, R.C. Scheerenberger's 1983 *A History of Mental Retardation*, Chapter One is titled 'In the Beginning (4,000,000 B.C.–A.D. 476)'; of this, the history of Greece gets five pages. Scheerenberger does imply that mental retardation has some socio-cultural determinants, but he jumps to faulty examples, concluding that the Greek system was based on beauty and wisdom, and that, since the Greeks valued wisdom so highly, people with low IQs must have had no place of value in their society.[11] In their article on intellectual disability in the 1983 edition *Handbook of Child Psychopathology*, Alan Repp and Diane Dietz advanced this conclusion, making a graphic claim that 'it was not uncommon for handicapped persons to be left to perish in open sewers …, to be used as physician's slaves, or to be kept for the amusement of the court.'[12] The

7 Sarason, Doris (1979) 18.
8 Barr (1904) 24.
9 Kolstoe and Frey (1965) 1.
10 Rosen et al. (1976) 1.xiii.
11 Scheerenberger (1983) 3, 10.
12 Repp and Dietz (1983) 98.

author of a 1984 textbook, the second edition of *Childhood Psychopathology: A Developmental Approach*, had not re-examined the assumption, noting that intellectual deficiency in Greece and Rome 'was treated with contempt and persecution', as well as disdain.[13] Even in 1991, authors were still citing each other's summaries to provide historical background notes. Cleland's essay on 'Developmental/Mental Retardation' summarises the history of developmental disability from antiquity to the Renaissance in less than two pages, omitting Rome in the process.[14] Such historical overviews follow the flawed logic that the Greek emphasis on wisdom and beauty led to the wish for eradication of disabled people, and this was taken as a foregone conclusion.[15]

Superficial summaries of the ancient world, based on unexamined presuppositions and devoid of properly scrutinised evidence for or against the practices of the time, were sketched by authors whose own, twentieth-century culture demonised and segregated people deemed mentally deficient—indeed, some of these authors set out to study and eradicate the demonisation and segregation that they assumed also existed in the ancient world. Martin Barr's reference to the 'awful appellation "idiot"' should not blind us to the fact that at the time of his writing, 1904, the word idiot was a perfectly acceptable medical term, and that the person it referred to was dangerous and useless.[16] A protective coating of ancient historical precedent on top of medical confirmation is always reassuring. The mirage of a utopian Greek insistence on truth and beauty was enhanced by seductive printed and painted images of languid Greek perfection, and perhaps by a collective longing for a golden age, preferably an ancestral golden age, unmarred by the grey areas of ethical quandaries. 'When we study mental retardation,' Sarason and Doris remind us, 'we are studying our own society and how and why it changes.'[17]

Anachronistic conjecture and retrospective diagnosis have left us with a portrait of chronic misery for imperfect people in the Graeco-Roman world. This may or may not be an accurate portrait, but it is the bulk of what we have for secondary material. When we work outside the faulty framework upon which these conclusions are based, we work without

13 Knopf (1984) 10. The first edition was published in 1979.

14 Cleland (1991) 343–360; the historical condensation appears on pages 344–345.

15 For a demonstration of how eighteenth- through twentieth-century German scholarly assumptions are flawed by philhellenism, see Marchand (2003).

16 Usage of such terminology in context can be found by searching the library collection of the Disability History Museum at www.disabilitymuseum.org [accessed August 2012].

17 Sarason, Doris (1979) 18.

the net of having anything at all to conclude. Even compiling a list of ancient intellectually disabled individuals presupposes the concept of a post-Cartesian and assessable mind. Generating such a list is an exercise in frustration that results in a messy collection of snippets. To avoid this twentieth-century trap (and we are fully aware that we are probably falling into a twenty-first-century trap because we are already in its invisible net), we approach the study as an investigation of disparity in the ancient world, focusing on the reconstruction of the vocabulary of ancient assumptions, attitudes, and beliefs about disparate people. Using material from five historical eras over a millennium of ancient history, we do not claim to be writing the history of Graeco-Roman disability, but instead putting forth a model of investigation. This is not a thorough excavation, but rather a surface survey that takes some core samples of literary material at five historical junctures. We are also aware that our material is western, in that Graeco-Roman history is usually counted as European history, and that material from non-western societies may demand other methodologies and starting points altogether.[18] Finally, we recognise that there is also the specific theme of people disabled by madness, which has indeed been investigated by others; however, what we are seeking (if in fact with the utmost difficulty) here is a concept of intellectual disability with connotations of permanence and identity.[19]

3. Methodological Issues

Whether or not any or all of the Julio-Claudian emperors actually displayed physical and psychological peculiarities—Tiberius's night vision and paedophilia, Caligula's migraine-driven mania, Claudius's loping and stammering, Nero's megalomaniacal pyromania or Domitian's paranoia—is beside the point. A single rudimentary element of historiographical method, often ignored, applies to both physical and intellectual disparity. One must at all costs avoid the presupposition that when we come across an ancient label—and the very word label is modern, since it implies a noun whereas

[18] The introduction to this book [pp. 10–12] makes clear the lack of nonwestern material and provides some suggestions for interested scholars to pursue.

[19] On madness and *mania* see the magisterial work by Pigeaud (1989), though he wisely refrains from using such specific terms in its title. The unpublished state of P. Clark's superb dissertation (1993) is most unfortunate. See also the surveys by Godderis (1987) and Stok (1996). More recently there is the collection of essays in Bosman (2009), in which particularly the contribution by Cilliers, Retief (2009). See also Clark, Rose in this volume.

an ancient text will supply an adjective or substantive more often than a noun—it will correspond with the set of characteristics that we attach today to an equivalent-sounding label. We need to slice this knot at the outset.[20] On the evidence, the category of intellectual disability in particular demands a strong scepticism: that is, there is more or less no cross-historical correspondence at all. Intellectually disabled people—so say the cognitive psychologist and the doctors, teachers and social workers who follow her lead—lack intelligence defined by such characteristics as the ability to generalise or make abstractions, to reason logically, to process information or maintain attention. We shall not find the *moriones* and *fatui* of ancient Rome defined by any such characteristics, though they do lack appropriate manners: they go in for such things as, for example, socially inappropriate truth-telling, effeminacy, or dressing outside the conventions of their gender or social station. What is the diagnostic link between these two sets of characteristics? It exists only at the level of status. A modern intellectually disabled person lacks precisely the intelligence that enhances the professional role of the cognitive psychologist in prescribing the characteristics of abstract thinking or logical reasoning; a *morio*—the model of the household jester—lacks precisely the honour of his master, and enhances the latter by expressing the fact that the master owns a *morio* to entertain dinner guests and thereby display the master's largesse. By ability, we understand here a status concept, primarily if not exclusively. Intelligence no less than honour is a status concept at root, and it is at this level that cross-historical correspondences may be taken seriously.

Add to these issues the Cartesian divide between mind/intellect and body, which was only fetched out of us by the onset of modernism, and we must conclude that the ancient primary texts may sometimes create certain correspondences by accident or coincidence, but everything else is retrospective diagnosis and misassumption (on which see also Graumann in this volume). As we shall see below, symptoms are not listed, even in medical texts, under common headings that we ourselves would recognise.

4. Greek Homeric Writings

At the beginning of our exploratory timeline, the Homeric writings highlight the methodological caveats outlined above. Homeric vocabulary reveals a lack of standardisation and abstraction necessary for a condition (such as

[20] For an extended discussion of such problems, see Karenberg, Moog (2004).

intellectual disability) to exist discretely, that is, having its own life outside real events. Homer's tales feature gods, heroes, and other idealised characters; few everyday individuals appear in these accounts of the closing years and aftermath of the Trojan War. Most of the human figures in the Homeric writings, especially the *Iliad*, have somewhat interchangeable characteristics of military prowess. Some of the characters in the later *Odyssey* display less interchangeable and less ritualised characteristics than those in the *Iliad*, but the internalised independence of personality that drives twenty-first-century western entertainment is absent. To be palatable to a modern audience, the tales must be infused with modern individuality, as in the 2004 film *Troy*.[21] While fans of Brad Pitt may not care that his portrayal of an ambitious and moody Achilles is anachronistic, one must remember that the larger-than-life Homeric figures are heroic in the ancient sense of confirmative ancestral destiny, not the modern sense of renegade individual choice.

In the *Iliad* and *Odyssey* we see the earliest Greek vocabulary for lack of intelligence, and, more importantly, the ways in which disparity was narrated. Behaviour, demeanour, or appearance put some Homeric figures in the category of the fool or lout, and it is important to note two points: first, this characterisation was a social observation, not a medical one; second, the category was fluid in that it was rarely a permanent or primary descriptor. As is the case of the vocabulary for physical disability throughout subsequent Greek sources, the terms implying intellectual shortcomings are far from codified in the Homeric writings. There is none of the medically based shorthand that we use today, from the medical diagnosis ('she has Down's Syndrome') to the statistical ('his IQ is [pick-a-number]') to the euphemistic ('she is a little slow'). Homeric vocabulary belies any notion of a measurable standard intelligence, a consequent medical label, or a corresponding set of personal features; therefore, there are no euphemisms to soften the blow of diminished dignity.

We can, however, draw some broad conclusions about early concepts of the mental apparatus. A cluster of words in the *Iliad* and *Odyssey* describes the earliest Greek understanding of intellect and lack thereof. The Homeric vocabulary shows that human beings had the potential to act foolishly, due to a variety of causes, and that what one sees today as a stable, interactive mind and body were perceived as a dynamic, inseparable unit. The apparatus that effected foolish or wise behaviour was housed in the body, specifically in the torso. Homeric figures varied in intellectual acumen, and some people

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21 *Troy* (2004) dir. Wolfgang Petersen.

displayed unwise, foolish, and stupid characteristics. Some characters displayed characteristics of foolishness consistently—such as the above-mentioned Thersites and Elpenor—but there is no suggestion that foolishness, on its own, was a fixed category.

Three early Greek root words—φρήν, νόος and νήπιος—show the importance of qualities other than modern measurement that determined one's wise or foolish character. We can appreciate the first term, the φρήν, by suspending some modern and deeply internalised concepts about physiognomy. While most modern people have been educated to perceive the brain as the central operating system for the body and its actions, the mind and the body were perceived to be integral and inseparable in Homeric times, and in fact in all pre-Cartesian historical periods. Within the Homeric unified system, the chest, not the head, was the seat of thought.[22]

This is not to suggest that the concept of a central operating system—a brain—was merely perceived as dwelling in the chest instead of the head. The root φρήν is a multifaceted term within the intricate Homeric mind/body system. The entry for φρήν in Richard Cunliffe's standard *Lexicon of the Homeric Dialect* is composed of four main categories with several ranges of meaning within each category. First, the φρήν, which is usually seen in the plural, can refer to the midriff; second, vaguely as the seat of important functions such as the heart, mind, soul; third, the heart, mind, or soul itself, or as the seat of vitality or intelligence—which can mean perception, thinking, or memory—or as passion, anger, desire, feelings, and moods, or one's character; finally, the term can refer to one's inward self.[23] The term φρήν can be negated with an alpha to produce a sense of slow-wittedness. The resourceful Penelope, for example, disbelieving her slave's news of her long-absent husband Odysseus's return, declares that the gods can turn wise people into fools (ἄφρονας).[24] Wine can affect the wits, famously in the case of the Cyclops, thus allowing Odysseus's clever escape from his predicament.[25] The doomed Hector scolds Patroclus, suggesting that through his witlessness (ἄφρονι), his wits (φρένα) were swayed by Achilles.[26]

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22 Clarke (1999) 73 shows us that in the Homeric epics, thinking 'has nothing to do with the head or the brain. The head … is a sign of life and identity, especially from another person's point of view, but the seat of thought and consciousness is the upper torso.' As a way to envision and sense this alternate structure, one can turn to Snell (1953) 8 who ingeniously suggests, in *The Discovery of the Mind*, the modern parallel 'he carries thoughts of his beloved in his heart.'

23 Cunliffe (1963) 411–412.

24 Homer, *Odyssey* 23, 12.

25 Homer, *Odyssey* 9, 362; see also *Odyssey* 18, 331.

26 Homer, *Iliad* 16, 842.

Another rich term, νόος, offers insight into the Homeric connection between thought and action. Often translated as mind, νόος refers to mental power and sense more specifically than φρήν. It is located in the chest, but it is not a material entity or a discrete organ in the same way that we perceive the brain. In her insolent reprimand to the disguised Odysseus, Melantho asserts that wine controls his mind (νόος)—'or', she asks, 'is your mind always like this?'[27] Even the gods can blunder. The νόος of Zeus is always more powerful than that of mortals[28] but Zeus and the other Homeric gods, although they are impervious to death, exist within the constraints of their anthropomorphic bodies.[29]

The Olympian gods, though, are all adults. The third term traced through the Homeric writings is νήπιος, which describes someone who is literally young, not yet speaking (the negative prefix νη plus ἔπος, word), and, as Cunliffe's lexical entry reads, 'childish, foolish, thoughtless, senseless, credulous'.[30] Childish foolishness (νήπιοι) refers to the Trojans' collective display of the gullibility of a child;[31] in the *Odyssey*, a goddess reproaches Odysseus as being babyishly imprudent (νήπιος) and slack of wit (χαλίφρων).[32]

In no case is there is a discrete category for weakness of mind in the Homeric writings. Foolishness is an uncomplicated explanation for actions and outcomes. It is tangible and corporeal in that it is demonstrated by behaviour. Foolishness can be a figurative expression, but a weakened, drunk, or childish mind is not an abstraction. Mental disparity, as much as it can be isolated and identified in the Homeric writings, is inextricably intertwined with somatic indicators, causes and consequences.

5. The Philosophers

The writings of Homer remained foundational in later Greek writing and into the Roman period. We cannot bridge the earliest Greek writings and the

[27] Homer, *Odyssey* 18, 331–332.

[28] Homer, *Iliad* 16, 688.

[29] Sissa and Detienne (1989) 30–31: Except for blood—the gods have ichor in their veins—'everything in the bodies of mortals and in those of the Immortals corresponds perfectly. The limbs are the same; the tissues are identical; the internal parts differ in no respect. The same terms are used to designate them and to refer to their functions.'

[30] Cunliffe (1963).

[31] Homer, *Iliad* 18, 311. The same principle in reverse—that even a fool can understand something obvious—is seen in Homer, *Iliad* 17, 32.

[32] Homer, *Odyssey* 4, 371; see also *Odyssey* 13, 237.

Roman ones explored below without touching on Plato and Aristotle, whose schools and writings reflect developed Greek rational thought.

For our purposes, special caution must be taken around interpreting disability in the two philosophers' records. Much has been written about Plato's distinction between gold, silver, and bronze souls, and about Aristotle's theory of natural slavery, as paradigmatic ancient forms of intellectual and moral differentiation. First, is Plato serious? Anyone who claims to have plumbed the habitually murky, multi-layered depths of his irony, here or anywhere else, is a truly exceptional individual. Secondly, we should remember that Plato's 'real' Utopia is not *The Republic*, in effect a long poem about justice, but Magnesia, the ideal state whose detailed constitution he itemises in *The Laws*. Here, he explicitly says that people who are slow-witted and illiterate may qualify to be rulers, as long as their intellect is in harmony with their desires: perhaps ironically (one is never sure), but if so, the irony is aimed at the false claims of others to intellectual acuity and therefore to social distinction and, above all, power.[33]

As for the theory of natural slavery in Aristotle's *Politics*, we must bear in mind the strict Graeco-Roman metaphysical distinction between possession and use. Nowhere does he say that slaves, even natural slaves (as opposed to prisoners of war), are less than fully human. They lack a certain component of the psyche (deliberation), but more precisely they lack its *use*, and only because of their place in the economy.[34] Concluding that Aristotle states that slaves do not *possess* reason is a misreading of the text. And when in *On the Soul* he remarks on an association between something intellectual and the sense of touch (soft skin, presumably untainted by manual labour, is a sign of cleverness), or on the loss of faculties in old people, all he wants to show is that such differences do not challenge the fundamental rule by which the soul is form to the body's matter. Animated or ensouled bodies may be differentiated, but not souls as such. In general, *On the Soul* is not a work of psychology in the modern sense that supplies us with any cross-historical reference-points about intellectual differentiation. The prior, essential question must be, what did these texts mean to contemporaries?[35]

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33 Plato, *Leges* 689d.

34 Aristotle, *Politica* 1252a. For a more detailed discussion, see Goodey (1999) and (2011) 25–36.

35 Aristotle, *De Anima* 414a; 417a.

6. Roman Reception of Greek Perception in Satire

Was there not a category of 'born fools' in Roman thinking? At first sight, the presence of the figure of the *morio*, especially popular in Roman satire, might lead one to suspect so. However, satire is perhaps the easiest genre to misread because of its exaggerated proclamations and tongue-in-cheek realism.

The abundant vivid and sensual satirical writing does indeed provide a window into Roman daily life in the first century. Events of the Late Republic, the Civil War, and the dynasty of the Julio-Claudians presented many opportunities for mockery. Indeed, the atmosphere necessitated mockery, as Carlin Barton argues in *The Sorrows of the Ancient Romans*. For Romans negotiating these decades, the tension of the increasingly dynamic social hierarchy was heightened by the potential loss of honour, especially in social standing, and made its attainment that much sweeter and more important. The agonistic struggle to gain eminence, that is, honour and status, 'wedded forever in dialectical tension', characterises this era of spectacle.[36] The portrayals of the flawed and eccentric emperors of the infamous Julio-Claudian dynasty reflected an unfamiliar and flawed society.[37] Rapid social mobility, urban growth, and unevenly distributed wealth upset the old order, even while strengthening and adding a warm glow to the memory of the order. Relentless change that brings unfathomable new distinctions is devastating, and the creative arts provide a balm for instability. Barton's explanation of the function of early imperial Roman performative mockery also provides a summation for our framework of parity and disparity:

> [I]f there is only sameness, only identity, without difference and oscillating tension, there is no world, no self. But the more and finer the distinctions—the difference without the sameness, the sameness without the difference—the greater the gap falling between difference and sameness, the more extreme will seem the bridging of the gap, the fiercer, the more obvious, the more brutally self-conscious, the more ludicrous and obscene the play that will be necessary to preserve the world.[38]

Here, Barton refers to staged comedy and ritual that effected the 'dynamic equilibria' of the Roman universe, and also points to amuletic properties

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[36] Barton (1993) 186–187.

[37] Garland (2010) 45–58 describes this phenomenon in his third chapter, 'The Roman Emperor in his Monstrous World.' See also Karenberg, Moog (2004).

[38] Barton (1993) 175.

provided by people who were considered feeble-minded. 'But the most fragile thing of all was honour'.[39]

This framework is a worthwhile reminder that identifying ability and disability, or parity and disparity, is not a straightforward task. The murky boundaries of modern disability are a caution against trying to define anything with precision in antiquity. Today, disparity is cloaked in specialised medical and legal definition. The instability of first-century Rome and its consequent creative talismans point us to the ritual of dining as a diagnostic tool. Food and table-settings signified degrees of disparity. The satirical talismans of the Roman author Martial demonstrate this especially well.

Martial's Satires often tie economic disparity tightly with physical characteristics and physical display, especially in matters of etiquette. His sketches of physical characteristics sometimes happen to correspond with modern physical disability; sometimes they do not. Martial's epigrams are akin to glimpses into the traditional Dime Museum of human oddities, but his mini-freak shows on literary display did not consist of twentieth-century curiosities such as bearded ladies or dog-faced boys; his freaks were odd by ancient Roman standards.[40] This also applies to Martial's occasional references to *moriones*, the term most closely associated with the household jester, whose star performances are normally at the dinner table. Apart from Martial's frequent aiming of this term at his peers (in which case he is simply saying 'I am superior to you'), we find two cases where something more specific is indicated. One of them appears amidst a series of epigrams on the theme of bad debt: 'I bought what you called a fool for twenty thousand sesterces: give me my money back, Gargilianus, he is no fool at all'. The other case, in which the (voyeuristic) theme is cuckoldry, concerns a household *morio*, a dwarf used by his master (who is thus the greater fool) as a proxy in sexual games with the master's wife.[41] In both passages, we must ask of the source, first, if there is an assumption of the existence of intellectual disability.[42] All we know about the

[39] Barton (1993) 172. Barton discusses 'dynamic equilibria' as a homeopathic system of order on page 180. See Barton (1993) 168 on amuletic properties.

[40] An excellent discussion of the Dime Museum and freak show in twentieth-century North America can be found in Adams (2001).

[41] Martial, *Epigrammata* 8, 13; 12, 93.

[42] See for example Garmaise (2002). Garland (2010) 48 translates *morio* here as 'cretin,' thus medicalising the term. Gevaert (2002) analyses the ancient texts via the definition of mental retardation supplied by the *DSM*, though admittedly the latter does incorporate certain social features (albeit without acknowledging that they are determined by and limited to a particular society). Specifically on Martial, Gevaert (2012) again takes 'mental disability' for granted, but inserts this within what one might call a celebratory approach to the panoply of human monstrosity.

first *morio* is that he fails to behave in the way imposed by his occupational role and subservient status, and about the second, we know only about his physical as well as social stature. Whenever one jumps to conclusions about his 'intellectual' disability, the very conceptual existence of which is modern, the tacit premise consists of certain absolute presuppositions laid down by one's own conditioning.[43]

Eunuchs, too, were one of Martial's favourite peep-shows, as they broke so many conventions of gender in an age that was trying to recapture the glorious but lost era of outrageously courageous men and suicidally faithful wives.[44] In Epigram 81 of Book 3, Martial makes fun of the feminine physique of the eunuch Baeticus, and goes on in the same epigram to make efficient jabs at several other social, sexual and religious disparities. Adulteresses, who show no outward physical deformity beyond being female, are also part of Martial's sideshow of tantalising social danger. Martial's circus included slaves, some (to Roman sensibilities) amusingly deformed, as entertainment at dinner parties. One must ask, though, if it is the deformity of the eunuch/slave or the gaucheness of the host, or both, that Martial puts on stage as the freak. What thrilled the *Roman* voyeur?

It is Juvenal above all who tells us how central is the role of the voyeur. Like Martial, Juvenal composed satire, and, like Martial, Juvenal was ruthless in his malice. No one was safe from his condescending descriptors. From depraved and deformed commoners to the most dignified aristocrats, Juvenal drew attention to every ugliness and embarrassment that he could find, embellish or create. A line-up of Juvenal's characters with disabilities, as we would define disability in its medical terms, produces a parade of historical

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43 Admittedly, the term can sometimes be more ambiguous. Augustine, *De Peccatorum Meritis et Remissione et de Baptismo Parvulorum* 1, 22, 32 (PL 44, 127) says that *moriones* 'resemble cattle' (*ut sensu vicino pecoribus nascerentur*). He then adds, 'I do not mean people who are very slow of wit, for this tends to be said of others' (*non dico tardissimi ingenio, nam hoc de aliis dici solet*). Does he mean that *moriones* are not the same as the slow-witted, or that slow-wittedness is 'said of others *too*'? Kellenberger (2011) 135 assumes the latter. Goodey (2011) 187 assumes the former (Augustine does not describe such people precisely as *stulti* here, which for him usually meant a lack of specifically *religious* wisdom). Be that as it may, slowness—even at this late stage in the timeline—has only a minor significance in these passages; the defining behaviours of such *moriones* still bear no discernible relation to modern ones, nor do they in his usages elsewhere: see Augustine, *Epistulae* 166, 17.

44 Eunuchs appear in Martial, *Epigrammata* 2, 45; 2, 54 (eunuch protecting a house); 2, 60 (castration as punishment); 3, 58; 3, 91 (castration of a Gallus); 3, 81 (*mentula abscisa*); 3, 82 (eunuchs at a party); 6, 2 (the law of Domitian against castration); 6, 67 (eunuchs as lovers); 8, 44; 9, 5 (cf. 6, 2); 11, 72; 11, 74 (possible castration); 11, 81 (eunuch in bed). See Gevaert (2012).

insignificance. Juvenal's satires skewer people who are disabled by their dependency, by their quality of life, and by their interactions with other people. Such flawed people were not necessarily physically marked, as in having lost a limb; instead, they were marked by the physical manifestation of their social status. Women who transgressed the boundaries of womanhood, miscreant patrons or clients within the patron-client relationship and native Romans who were cheated by non-Romans were all literally disabled in that they were unable to fend for themselves and to fill the socio-economic station that they were expected to hold. In his satire, the issue of inability is often brought, quite literally, to the table. In Juvenal's Satire 5 the client Trebius, disabled by his poverty and lack of choice, suffers from his disparity not by a flight of stairs that he cannot climb or by the indignity of having to ride in the goods lift, but his disparity is marked by his table setting: 'The master receives his wine in golden vessels, but you get no golden vessels—or if you do the waiter is stationed by you to count the jewels'. Trebius's wine goblet is cracked and dirty; his inferiority is displayed with every sip of sour wine.[45] The ultimate consequence of his self-abasement is revealed at the end: some day, Trebius will turn into a clown, an entertainer with a shaven head, receiving blows to the head. In this way, he will become quite like the *moriones* who acted as jesters at Roman banquets.[46]

No properly named *moriones* occur in Petronius' Satyricon, but again propriety in general, and table manners in particular, loom large in this work, especially in the scene of Trimalchio's dinner party. Petronius's protagonists, too, are often barred from the socio-economic plateaus to which they aspire, but Petronius has them take some delight in their exile. For Petronius, parity had to do with social hierarchy and all its trappings. In Petronius's world, being a functioning member of society meant being Roman, in the nostalgic sense of the word. Trimalchio's dinner party is a circus of gauche forgeries of the hierarchy of the nobility; part of the forgery includes the ostentatious display of slaves. Trimalchio's own blear-eyed pet slave (*delicias suas*), whose doting on his own obese puppy is outdone by Trimalchio's

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[45] Juvenal, *Saturae* 5, 39–41. On this satire, see particularly Sebesta (1976), who claims that Juvenal is protesting not merely gluttony and greed but the violation of the old precept which underlay ancient society, that the stranger, regardless of status, was to be welcomed to the table. See Rimell (2005) for dining in the context of Juvenal's satire.

[46] Juvenal, *Saturae* 5, 171–173. Juvenal does not use the word *morio* (it does not appear in his satires), but Braund (1996) 304 makes the link with *scurrae*, *cinaedi* and *moriones* at Roman banquets.

display of his own large guard-dog, comes closest to Martial's descriptions of jester-like *moriones*, associating the position of obsequious servants with overly domesticated house pets.[47]

In this age, the state of slavery was not an immutable characteristic. Trimalchio himself had been born a slave, but the tasteful use of slaves was part of the toolkit of the aristocracy. The way in which the slaves were paraded at Trimalchio's dinner was equivalent to his over-the-top décor and his fumbled recitation of Homeric verse in delineating social hierarchy and demonstrating the horrors of sudden wealth from trade rather than ancestral, landed wealth. Trimalchio posed as having parity, and his crude attempt at passing was the butt of the joke.[48] Especially pronounced in Petronius's writings, disparity is measured and shaped at the dinner table by the literal distance between host and guest; figurative distance is measured by the quality of food and serving vessels. In one breath, Petronius refers to the lost vigour of adolescence, arthritis (*podagricus*), tuberculosis (*tisicus*), and fatally flawed Greek, when the vulgar Plocamus describes his fallen condition at Trimalchio's dinner party.[49] None of the satirists bothers to distinguish between types of flaws: flawed people were flawed people, whether by the ugliness of a physical deformity or the gaucheness of financial greed and trickery. The markers of disparity were as interchangeable as their interpretations.

It is not only disgruntled satirists who reveal the constructs of parity and disparity through the decorum of dining. Pliny the Younger, who was as loyal to and allied with the Roman state as he was humourless, wrote, in one of his many letters to Emperor Trajan that 'any man whom I have placed on an equality with myself by admitting him to my table, I treat as equal in all particulars'—in his words this included even freedmen.[50] But who was

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47 Petronius, *Satyricon* 64 (transl. M. Heseltine). Compare Augustine's comparison of certain people with cattle in *Epistulae* 166, 17: *Quidam ... tantae sunt fatuitatis, ut non multum a pecoribus differant, quos moriones vulgo vocant*. Ulpian, too (*Digesta* 21, 1, 4, 3), compares the purchase of a slave who turns out out to be *fatuus* or *morio* with that of a draught animal lacking courage: *quamvis non valide sapientem servum venditor praestare debeat, tamen si ita fatuum vel morionem vendiderit ut in eo usus nullus sit, videri vitium ... unde quidam iumenta pavida et calcitrosa morbosis non esse adnumeranda dixerunt: animi enim, non corporis hoc vitium esse*. See Garmaise (2002) 55–56.

48 Petronius depicts Trimalchio as having been a slave: Petronius, *Satyricon* 75–76. Excellent introductions on the *Satyricon* as a source for social history include Andreau (2009) and Verboven (2009).

49 Petronius, *Satyricon* 64.

50 Pliny, *Epistulae* 2, 6, 3–4: *Eadem omnibus pono; ad cenam enim, non ad notam invito*

invited to Pliny's table? A gentleman and a diplomat, Pliny professed to maintain disinterest in physical appearance, concerning himself only with people's 'moral goodness.'[51] But physical appearance and moral goodness were intertwined. Physical well-being in Roman society transcended the modern personal battle for health and fitness. The *paterfamilias* was responsible not only for his own health and wellness but also for that of his entire household. Failure to control one's health was unacceptable because it endangered the stability, or revealed the instability, of one's household. Pliny expresses admiration for healthy restraint and balance in all matters. He has high praise for a friend's temperance: 'how abstemious in food, and what absolute restraint he puts on all his appetites.'[52] The stylistic contrast between Pliny's and the satirists' writings is remarkable, but the contextualisation of disparity is similar. Flawed people are flawed; Pliny and his friends are not flawed.[53] Pliny probably had his reasons to denounce the presence of *moriones* and other jesters at other people's banquets: he did not employ such entertainers.[54]

Suetonius also helps demonstrate the power of perceived and manufactured parity in his biographies of Roman rulers. Suetonius is our best, or at least most wordy, source of information for the Emperor Claudius. With this emperor, intellectual dispositions and bodily states seem to have been closely intertwined. Claudius is remembered, in popular culture, for his chronic twitching, running nose, stuttering, and status as a cuckold better than he is for his tutelage under Livy, his histories of the Carthaginians and Etruscans (now lost) or his building projects that facilitated a standardised empire. As a child, Claudius did not reach adulthood in a timely manner because of his dull body and mind.[55] As Suetonius tells us, his mother referred to him as an unfinished project (*tantum inchoatum*),[56] and in so far as Suetonius can be believed, he was hidden from the public as much as possible so that he and (more importantly) the imperial household would not be

cunctisque rebus exaequo, quos mensa et toro aequavi. 'Etiamne libertos?' 'Etiam'; convictores enim tunc, non libertos puto.

51 See Pliny, *Epistulae* 2, 7 on the death of the young aristocrat Cottius.

52 Pliny, *Epistulae* 3, 11, 6: *ut nihil in cibo in potu voluptatibus tribuat, ut oculos animumque contineat.*

53 Hoffer (1999) on Pliny's anxieties does not go into detail on this aspect.

54 Pliny, *Epistulae* 9, 17, 1–2: *Recepi litteras tuas quibus quereris taedio tibi fuisse quamvis lautissimam cenam, quia scurrae cinaedi moriones mensis inerrabant* (…) *Equidem nihil tale habeo, habentes tamen fero. Cur ergo non habeo? Quia nequaquam me ut inexspectatum festivumve delectat, si quid molle a cinaedo, petulans a scurra, stultum a morione profertur.*

55 Suetonius, *Claudius* 2, 1: *adeo ut animo simul et corpore hebetato ne progressa.*

56 Suetonius, *Claudius* 3, 2.

mocked. When Claudius became emperor by twists of circumstance, he did not shed his physical traits, but he did shed the disparity that they previously marked. Suetonius summarises Claudius, post-emperorship, as 'tall but not slender, with an attractive face, becoming white hair, and a full neck.'[57] This description is contradictory, at least to modern aesthetic perception, because Suetonius also reports that, even as emperor, he stumbled as he walked, and, when angry, he would foam at the mouth and his nose would run.[58] That Emperor Claudius was portrayed in facial and somatic balance and symmetry, in statuary and other imperial symbols such as coinage seems less of a contradiction because we know that this was not intended to be realistic portraiture. All emperors were portrayed with ideal bodies; imperial statues were designed to accommodate the removal of the idealised head of one emperor to be replaced by the idealised, stylised and iconographic head of his successor, and no exception was made for Claudius. Because he was the emperor, the ultimate *paterfamilias*, he had to be balanced in every way, therefore he was portrayed as perfectly balanced in iconography. This was how he was imagined around the far-flung population of the Roman Empire, and perhaps even by the people near him. If anyone was bothered by the artifice, no records remain of a complaint.[59] When Seneca the Younger lampooned Claudius's stumbling entrance into the afterlife in the *Apocolocyntosis*, he was not contesting Claudius's divinity, and certainly not diagnosing him as a speech-disordered person or someone with low intellectual skill and antisocial behaviour. Seneca was mocking Claudius' emperorship: a proper emperor would not have been imbalanced in gait or in speech (see Laes pp. 163–167 in this volume).

From the Homeric tales, through the Platonic and Aristotelian writings, and on through the early Roman Empire, one's actual physical appearance had come to matter so little that the imperial somatic depiction was literally interchangeable. The exception to this rule of thumb is the popularity of physiognomics. In addition to having a popular cultural (read: malleable) profile, physiognomics was also medicalised, copiously, by Galen and others. Nevertheless, the elite made itself an exception to its own rule. Physiognomics was certainly a quasi-scientific system for patrolling the porous borders of

57 Suetonius, *Claudius* 30.

58 Suetonius, *Claudius* 30.

59 Apart from the bibliography cited by Laes, pp. 163–167 in this volume, we refer to Hurlet (1997) for a thorough analysis of the iconographical representation of Claudius before he was named emperor: then, too, he was portrayed with an ideal body.

the elite; but one used it to vet aspiring members, not to question the status of those who already belonged. These outsiders who did not belong were ascribed features that we now and then are tempted to identify as physical or intellectual disabilities—in fact, such labels are inapplicable to the ancient physiognomical categories.[60]

Furthermore, any suggestion of a brain/body dichotomy is absent during the early imperial period. By the second century CE, we see no suggestion of a codified scheme of disability, let alone a separation between codified mental and physical disability. Social station, whether signified by the dinner table or other demonstrations of hierarchy, was a far more important measure of one's status-appropriate worth than the modern statistical model.[61] Today, we scan people quickly, gather (mis)information, and relate to the subject of our quick assessment in what we conclude is the appropriate interaction, if any. A result of this modern phenomenon is narrated by Mike Ervin, who uses a wheelchair: while crossing the street, a well-intended donor threw coins into the cup of hot tea that he was holding, assuming that anyone using a wheelchair would only be carrying a cup in the hope of acquiring spare change.[62] In the modern world, one might think oneself able to sum up people's ability or disability by a quick calculation of their height, gait, clarity of speech, steadiness on their feet, facial appearance, and so on. Of course, faulty conclusions are likely to ensue; similarly, one can misread a person with a hidden disability, such as multiple sclerosis on a day when it is not manifesting itself, as nondisabled. In Rome, one would have been able to scan the dinner table (or the baths or the toilets or the market) to reach similar conclusions about parity and disparity. In the Roman world, though, it would have been more difficult to reach a faulty conclusion. The man seated at the end of the table, drinking from the broken goblet, did not have an invisible disparity (barring stories of wilful deceit), and this brings us full circle to the disguised Odysseus. The joke in Petronius's dinner party was that Trimalchio was disparate (slave-born and ill-educated) with a veneer of parity too thin to convince any of his guests, but, thanks to the topsy-turviness of the first century, his guests did not dare to question the accoutrements of his wealth.

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60 Bibliography on phsyiognomics in the ancient world is vast. See Evans (1969); Agrimi (2002).

61 The statistical model is summarised best in Davis (1995).

62 The account (which is not unique; see also Shapiro) is narrated in the documentary about the Jerry Lewis Telethon, *The Kids Are All Right* (2005), dir. Kerry Richardson.

7. Greek Writings in the Middle and Late Roman Empire

It may be objected that the above texts, especially the satires, deal with the discussion of human nature mainly by way of imagery and metaphor. Did not hard medical science, or at least some ancient variant of it, underlie all such traits, having its finger on some transhistorical pulse? What, for example, was the approach taken by Galen, the Roman Empire's most renowned medical authority, to such matters? Or Alexander of Aphrodisias who, like Galen, belonged to the Roman establishment? Together, the surviving writings further our understanding of ancient intellect and its disparities. These scientific writings mark the fourth point on our timeline and they provide a check for our conclusions about Roman reception of the Greek perception of intellect. Juvenal, Martial, and Petronius—and Pliny and Suetonius—were very old or dead when Galen and Alexander were born.

Two points must be noted about Galen. First of all, the idea of an intelligence that was purely a trait of the human species was, for Galen, not yet the presupposition as it is for us. In Plato and Aristotle, 'intellectual' concepts such as νοῦς had been too broad to correspond with ours, having a cosmic frame of reference (planets might have it, and even non-human animals). And by contrast, other concepts such as ἐπιστήμη ('understanding' in an active sense), φρόνησις (the wisdom of the citizen, functionally irrelevant to non-citizens, such as women) or λόγος (it was quite possible for a 'rational account' of something to be false) are too narrow. Galen appears not to have gone beyond this framework. Even when he uses a term with a discretely intellectual reference, which was not often, it tends to be διάνοια, by which he means (as did Aristotle) a succession of thought events rather than, as we do, a reified psychological object. As for ψύχη, this of course bears no relation to its Western successor with its necessary scare quotes, 'the mind', but is rather, in its various contexts, a metaphysical principle that allows for the explanation of why and how living (and some non-living) beings move.

Secondly, the phenomenon of human thought was for Galen an organic and somatic quality. He writes occasionally about the quality and mixture of what he calls spirit (πνεῦμα). But commentators from late antiquity through the early modern period may have exaggerated the importance of this assumption in Galen's writings.[63] In any case, his core focus of interest was always the state of the main bodily organs, including the head but also the

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[63] Rocca (1997).

heart, in which πνεῦμα functioned. Thought events, and likewise their moral and behavioural connotations, were secondary indicators of the health of these organs. A healthy temperament or complexion (κρᾶσις) in a bodily organ consisted of the traditional Hippocratic qualities of hot, cold, wet, and dry; an imbalance of these material qualities in some sense simply *was* a cognitive impairment. In this picture there is no dualism, or even mere complementarity, between intellectual and physiological elements. In a passage much cited in the Renaissance and even today (for want of anything better) as a primitive itemisation of intellectual impairment, Galen lists: coma, apoplexy, paralysis, catalepsy, vertigo, lethargy, fainting, melancholy, epilepsy and phrenitis.[64]

In such passages of Galen (as well as of early modern Galenists), the cerebral matter, thinking states, and the size and shape of the skull are all on the same taxonomic level, as *signs* of the temperament and balance of the patient's brain.[65] Moreover, even in conditions that were long-term, such imbalances were ultimately dispositional. Explanations of a chronic condition did not differ essentially from those of an acute one. The idea of a permanent disabled identity, then, especially a so-called intellectual one, did not and could not arise in a diagnostic context, let alone in a philosophical context. In descriptions of human identity, permanence (which entailed a need to keep checking) was trumped and transcended by essence.[66] A theory of signs and the practice of diagnosis lay at the heart of Galen's medicine, not a theory of causes. One only needs to think about causes if one wants to get rid of something or somebody, or a whole deviant group. In current research into the genes for autism, for example, certain psychological behaviours continually undergo short-term redefinitions with the presupposition that such behaviours can be linked to a more or less permanent, biologically determined physiological make-up (how, otherwise, could one be confident about the existence of such a condition?). The ancient dictum was that recognition of the appropriate signs enabled a doctor, hypothetically, to cure anyone; the Hippocratic corpus consists largely of one set of symptoms and outcomes after another. Among the Asclepiadic testimony, petitioners thanked the god for healing a multitude of conditions from complete blindness to years-long pregnancy and for ridding them of lameness and lice, but if any testimony thanks the god for

[64] Galen, *De Locis Affectis* 3, 5; see Clark, Rose p. 64 in this volume.
[65] See for example Sassi (2001).
[66] As, for example, in Aristotle *Topica* 130b.

addressing the condition of folly (or anything that might be imputed to be a category of mental insufficiency), it is lost.[67]

Throughout this summary of ancient scientific literature, does the idea of a permanent disabled identity appear in a psychological context rather than a strictly medical one? No such discipline as psychology then existed, of course, and would not exist until the nineteenth century. The sophistically inclined philosophers do at times attempt to classify behavioural types. Alexander lived about a generation later than Galen. Having studied Greek philosophy at Athens, possibly under Stoic teachers, he came to disagree with the principles of Stoicism. Portions of his commentaries on Aristotelian thought and of his own work survive in various translations. They include debates set up to knock down Stoic principles and to restore Aristotle, a task entrusted to him by the Severan dynasts at the opening of the third century.[68]

Alexander identifies something that seems to be discretely intellectual, and locates it in human nature. He describes an understanding of universals, that is, the ability to generalise from particulars, as belonging to all those who are not impaired (μη πεπηρωμένοι). Such people are 'more or less naturally endowed' with this kind of wisdom.[69] At a surface level, he identifies only himself and his own ideologically correct circle as unimpaired, as philosophers. The impaired, by contrast with philosophers, were idiots (ιδιωται). Idiots in Athenian democracy were outliers, men who had the capacity to participate in government but who did not. By the time of Alexander's text the word clearly means lay people: non-philosophers. Our translation of this fluctuating and charged term (idiocy was an important criterion in the era of nineteenth- and twentieth-century eugenic practice) remains deliberately anachronistic. It forces us to ask: exactly what characteristics qualified one for the label of idiocy? The logic of this passage is that Alexander's philosophical opponents, the Stoics, were the idiots. This is not a normal insulting of one's peers by referring to them as intellectually disabled or 'retarded,' since no distinct intellectually disabled population like ours was recognised at the time. It simply meant the Stoics were inexpert in their own discipline,

67 Edelstein, Edelstein (1945); Hart (2000). Kellenberger's (2011) scrutiny of relevant antique texts from the Near East as well as Europe turns up nothing that expresses a hope of cure, whether by medicine or by magic, while late medieval and Renaissance commentators held this to be an explicit denial by the Greeks: 'their mythical patron Asclepios made the blind see and the lame walk but, it was said, could not make a fool wise' (Goodey 2011, 212). At the very least, nothing was said out loud.

68 See Harrison, Swain (2007) 23.

69 Alexander of Aphrodisias, *De Anima* p. 81, line 27 (ed. Bruns).

philosophy—as inexpert as a non-philosopher or lay person. Lay people, however, were in a different position to Stoic philosophers in one respect: the reason they did not use their minds was because they had no cause to use them, since they spent most of their time in manual or commercial labour.

Again, the distinction between possession and use is important. The idea that any human being of whatever type might not *possess* practical wisdom (φρόνησις, which by the time of Alexander's interpretation included mathematics and logic) would have baffled a contemporary, since by philosophical definition the possession of such wisdom was contained in the definition of man. The idea that the majority of human beings might *use* such wisdom, however, would have been equally baffling, since most people's socio-economic callings self-evidently did not afford them time to develop it through study. When Alexander comments that the unimpaired intellectual elite 'are guided by nature itself to the apprehension of universals', nature here is not something deterministic, like an innate physiological cause, but a set of dispositions to be enhanced by training, where unimpaired means having the leisure to train.[70] Thus no one was permanently impaired in any sense we might recognise today. This shows us that beneath a discourse of disparity, in which only Alexander and Company are unimpaired or fully human, lies a deeper presupposition that recognises a potential parity among all human beings and certainly differs in this respect from our own perceptions and labels (mentally retarded; intellectually disabled), our measurements such as Intelligence Quotients, and our prevailing meritocratic contempt for a psychologically and morally deficient underclass.

Indeed, Alexander's impaired lay idiots provided him a stick with which to beat his Stoic opponents. He aimed precisely to attack the Stoics' deterministic concept of fate.[71] Philosophers (at least of Alexander's persuasion) and lay people alike, he says, are capable of conceptualising fate correctly: unlike the Stoics, who insist too much on it.[72] We should note, though, that another game may have been going on here. Despite Alexander's general opposition to the Stoics, his picture of human psychology in general, wittingly or unwittingly, tends to smuggle Stoic terms into his officialised version of Aristotle.[73] Ambiguity would certainly have chimed with the curricular

70 Alexander of Aphrodisias, *De Anima Liber* p. 82 (ed. Bruns).

71 Alexander of Aphrodisias, *Scripta Minima* p. 171 line 28, p. 172 line 5, p. 189 line 12 (ed. Sharples).

72 On Alexander's psychology see the introduction in Bergeron, Dufour (2008). On fate and providence, see Sharples (2003) 159–160.

73 Goodey (2011) 284.

requirements of the Roman state: on the one hand accepting one's fate has always suited the powerful, while on the other hand the state might have wanted to offer the prospect of upward mobility as a safety valve for social and political pressures from below.

In the Late Roman empire, so transformed that it would have stunned its founders, we can find the occasional stab at some disparity recognisable to the modern mind-set. Take Themistius for example, house philosopher to several of the Christian emperors, including Theodosius I. In his commentary on Aristotle's *De Anima*, he adds a quasi-scientific description of blind people to Aristotle's casual mentions of the horny-handed and the senile (who in any case had lacked only the use, not the possession, of intellect). Writing in a far more pathological vein, Themistius asserts that this sensory disparity has to involve an intellectual one, since geometry is the paradigm of objective knowledge about the abstraction of form from matter: how can blind people know about abstraction if they cannot see geometric shapes? And so (circularly) how can their own souls be in a state of full abstraction from their bodies?[74] In this scientistic pathologisation we can see a glimpse of the medieval 'faculty psychology' from which Cartesianism would erupt, to lay the foundations of the modern discipline.

8. Conclusion

The story of disability, though it is a new and non-traditional category of ancient social history, must be told within a very old and traditional context. In all cases, the criteria of the literate elite determined the degrees of parity. In terms of the descriptive content of disparate characteristics—physical, behavioural, intellectual—the ancient past from Homer to Themistius is a foreign country. In terms of the methodologies of discrimination, however, it is very familiar terrain indeed, moreover one that is in many respects transhistorical: that of political, social and economic status, where the anthropological constant is the need for elites to create and maintain out-groups.

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74 Themistius, *In libris Aristotelis de Anima Paraphrasis* 432a (ed. Heinze).

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PSYCHIATRIC DISABILITY AND THE GALENIC MEDICAL MATRIX

Patricia A. Clark and M. Lynn Rose

> *There is no psychology; there is only biography and autobiography.*
>
> Thomas Szasz, *The Second Sin*

1. Introductory Notes

Mental illness is part of the human condition. Disablement of the mind is not a single, static phenomenon, but a product of biological and cultural factors that manifest as socio-economic interactions and negotiations. It is a medium for expressing aesthetic, behavioural, and emotional extremes and limits. Exploring the ancient world from the perspective of mental disability provides a prism for a different view of more familiar categories of social history such as gender and ethnicity.

This chapter employs Galen's anecdotal reports of aberrant mental states to focus more on social interactions than on medical or psychiatric history. Much important work has been done tracing the history of specific diseases and their treatment; of the mental disorders, melancholy and epilepsy have received careful attention, and such work will not be reduplicated here.[1] In addition, good studies summarise medicine in the ancient Roman world and some in particular explore psychiatry and psychiatric disability in the Galenic Corpus.[2] The medical experience, however, is only one aspect, albeit an important one, of the total experience of mental illness in antiquity, or in any era.

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[1] On epilepsy, see the classic work by Temkin (1971) and Schneble (1987); for treatment of the transmission of medical terminology: Müri (1953); Klibansky and Panofsky (1964); Flashar (1966); Pigeaud (1984); Jackson (1986); see also Pigeaud (1987). For melancholy, see Müri (1953) and Klibansky, Panofsky, Saxl (1964); Flashar (1966); Pigeaud (1984 and 1987); Jackson (1986).

[2] Noteworthy here is the psychiatrist and scholar Jan Godderis, who discusses Galen's works in terms of psychiatry. See Godderis (1987 and 2008). Stok (1996) is also a standard work. Thanks to the thorough bibliography, it remains a starting point for any research to come.

Following those scholars who bring ancient social dimensions to medical history, we avoid focus on the diseases and disorders as entities in themselves, preferring, wherever possible, to highlight the experiences of people with mental disabilities by discussing physicians' attitudes toward them and the treatment they received at their hands. The diversity of expectations and attitudes among the writings of the major medical collections, is striking, and together, these writings provide insight into the lived experience of people who sought the doctors' help for their mental imbalance. One must begin with the ancient sources, as Christian Laes points out in his essay in this volume (p. 145–146), no matter how humbling it is to find sparse records that do not submit to modern classification or understanding. In addition, this small amount of source material is compounded by the other inescapable factor in writing ancient history: the view from ancient sources is overwhelmingly biased toward the outlook of the elite, educated male.

The historian is fortunate in that aberrant behaviour was easily identified, thus sometimes noted, in ancient societies. Behavioural norms in traditional ancient Mediterranean village communities were conservative and static. Even in the urban settings of Athens, the Hellenistic cities, Rome and the cities of the Roman world, people were expected to display behaviour according to their social station and gender, at least in their own neighbourhoods. Aberrant, deviant and exceptional behaviours, as a consequence, were readily identified and sometimes recorded.

Aberrancy was noted in many records, and explained in many ways, just as it is today. Alongside comedic, legal, rhetorical, and tragedic writers, the medical writers of the ancient Graeco-Roman world took note of people whose erratic behavior interested them—or who were brought to them. Medical writers observed, diagnosed, and sometimes treated people who performed in ways that significantly contradicted their social identity. From the sixth century BCE to late antiquity, practitioners of medicine and their apprentices built upon and critiqued each others' works. The writings of Galen, which are a compilation, critique, and expansion of eight centuries of medical practice, provide an excellent example of how we might approach the topic of what we loosely call insanity in the imperial Roman world. Galen, who lived and died in the second century AD, was born in Pergamum, and then served the imperial court at Rome. A product of Hellenistic syncretism and Roman imperial patronage, his copious works, many of which have survived, are based upon a medical tradition that originated with the rational thought of the sixth-century Greek philosophers. Galen presents anecdotal reports which consist of descriptions of the case, the

symptoms he chooses to note, and any additional observations which, as a physician, he considers relevant to the case.

We have already employed over a dozen vague and interchangeable terms. To this point, we have used, for the umbrella term of 'mental disorders that were noted by ancient writers,' aberrancy; aberrant mental states; aberrant behaviour; deviant and exceptional behaviour; disablement of the mind; disease; disorder; erratic behaviour; insanity; mental disability; mental illness; mental imbalance; and psychiatric disability. This is a good start. We aim to capture the vague and interchangeable nature of the ancient vocabulary, even when it is inaccurate and offensive by today's standards, and we will continue to use such terms, except where specifically noted.

We use semantic markers sparingly. After our first mention of insanity, we have not marked any term as anachronistic or unacceptable; if we were to do so, the essay would consist mostly of markers. Continuing along these lines, the 'we' used here is literal: we, Patricia Clark and Lynn Rose, are activists and advocates, as well as allies of people with disabilities. The pronoun is not meant to be an authoritative, exclusive 'we,' that is, experts with the power to peer into the ancient past at 'them'—people who are definitely 'not-us.'

We are also well aware of our use of relational medical terms, such as diagnosis, doctor, medical case, and patient: terms that conjure an anachronistic medical setting. Even today, people with disabilities are sometimes, wrongly, referred to as patients, or even cases, even when they have not been assigned that role, and this misassumption that a disabled person must be a medical patient sometimes appears in historical accounts.[3] When we use terms such as diagnosis, doctor, medical case, and patient, the terms are literal, rather than figurative stand-ins that one might hear today, e.g., "she is quite a case". In our literal use, people with various disorders approached deities, doctors, healers, and herbalists. In the collection of Galenic medical notes, or cases, the person who approached the doctor (i.e., Galen) sought a diagnosis, and probably a cure, and agreed (or refused) to be treated as his patient.

In all ways, it is our intent to contribute to the inquiry of psychiatric disability in ancient history by painting a mural, at least in broad strokes, of the experiences of people with mental disorders and disabilities of all varieties: behavioural, cognitive, developmental, emotional, intellectual, learning, psychiatric, and psychological, to name a few. We recognise, all the while, that the aforementioned terms are products of the modern era, that the

[3] See Rose (2012) 177–178.

mind/body split is itself anachronistic, and, because we live in bodies, that so-called mental disability has a physical component to it (cf. introduction p. 2–3). The mind and the body were inextricably combined for Galen and we shall discuss these issues below.[4]

It is especially important to note that people with mental disabilities in the ancient world did not identify as a community, that no intentional records of their disablement were kept, and that they did not live in a separate sphere. We do not aim to create a lost tribe of psychiatrically disabled people to restore to the pages of history: there was none. Still less do we wish to craft retrospective diagnoses of well-known historical figures. Our interest is in the stuff of daily life and in illuminating the ways in which ancient humanity shaped and was shaped by intellectual and psychiatric disability.

2. Approach

2.1. *The Social Process of Disease and Healing*

The vagueness of the ancient vocabulary, in fact, is central to our main observations. In this reading of mental illness in the imperial Roman world, our interrogation of Galen's writings falls into three categories: the ways in which he grouped symptoms and syndromes; the correspondences he posited between symptoms and diseases; and, thirdly, the system of classification Galen used for narrating shared characteristics of misbehaviour and atypical presentation.

First, with respect to grouping the symptoms and syndromes, we should like to know the mental aberrancies of the individuals who reached the physician, and what symptoms were presented and noted. The way in which symptoms and syndromes were grouped reflects the lived experiences of the people who became the subjects of the medical cases. Secondly, the causes that the doctors identified or ascribed to various aberrant mental states vary widely, even among the Galenic Corpus. Underlying and precipitating causes are not always as discretely medical in nature as in the twenty-first century,

[4] We also realise, of course, the enormous and very real difference between the common experiences of people today who are discovered to have a low IQ, on one hand, and people who are diagnosed with Criminal Behavioral Disorder, on the other hand. By failing to make these kinds of distinctions, we mean in no way to minimise the individual or common experience of the people who live or have lived with these disabilities; rather, we are staying true to the ancient text and context.

and ancient references in Galen to folk or lay beliefs are of special interest.[5] The perceived causes of a patient's malady may give us some insights into his or her experiences when seeking and/or receiving treatment and, in some cases, being cured.

We also ask how various states of mental disorder were distinguished from one another (or not, as the case may be) and how they were labelled. In all cases, we must be aware of factors such as age, social station, and gender, while acknowledging that, as usual, people of a higher social station had more access to medical care and are disproportionately represented in the written record. Our questions cannot be answered in every case; nevertheless, they should be posed, and Galen's writings allow us at least to address them, and, in some cases, to reach some broad conclusions.

These three considerations point to our central question: what was the lived experience of people with psychiatric disability in imperial Rome, and when they sought treatment and healing, what were the consequences? Cornelia Horn, in this volume, discusses the ancient understanding of cures. Some cures might not be considered successful by the standards of modern medical assessment, and Horn discusses the interpretation of failed treatment. Explaining disease and healing as a social process, she differentiates between the patient's long-term relationship with the people in his or her permanent dwelling and the short-term relationship with the people encountered during the transitory experience of the healing site: these relationships were important variables when it came to determining whether the patient had received a successful or failed cure. She notes other factors relevant for grasping the lived experience of Galen's practice: prescribed cures and their accompanying expectations of recovery, as well as treatment and prognosis may shift according to the patient's gender and status.

2.2. *Models of Scholarship*

Scholarly trends over the last quarter-century enable us to study everyday life and its frameworks in a meaningful way. The process of fleshing out political and military historical accounts with social history demanded not only new data but also new conceptual paradigms. In order for classicists and historians to investigate the identity of ancient women, for example, any sophisticated approach required incorporating the dimension of gender

[5] Clark (2011) brings to light the extended transmission and shifting reception of traditional folk healing in her translation and commentary of a medical notebook from a Cretan village.

into the field.[6] In the same way, the role of foreigners was shaped by ancient perceptions of ethnicity, and children could only be restored to ancient history within the context of childhood and the lifespan.[7] We cannot reconstruct the ancient world by inserting subjects that are shaped by modern measurements or rely unreflectively on frameworks that are modern inventions. Instead, the concept under investigation itself must be considered in its historical context, as demonstrated pre-eminently in a recent study of ancient anger.[8] The necessary process of sorting through frameworks and rejecting assumptions works to reveal the frameworks of ancient societies. Whether one is considering anger, children, or foreigners, one must consider the wider context in which they existed, as well as the opposing concepts (self-control, adults, and citizens) which give them meaning. These socio-historical models and approaches are helpful in any study of psychiatric disability, and help us to avoid the temptation of imposing modern pathology onto an ancient ethos.

2.3. *Disability Studies*

The tenets of Disability Studies, central to this investigation, rest upon questioning assumptions about human normalcy, variance, and measurement. Assessing and classifying people on the basis of where they fall on a scale of normal ability and behavior, and identifying them and labelling them accordingly, seems natural to people in the modern western world. The split-second measurement and categorisation that might feel like part of social nature is, however, actually a product of modern standardisation and statistical normalcy (cf. introduction in this volume).

Disability exists as a tangible experience, but its measurement, interpretation, and parameters vary over time and from one culture to the next. A useful comparison for disability can be found in our modern vernacular understanding of children. The process of child development, with its phase of toddlerhood, was not part of the ancient world, nor was there a standard

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[6] Van Nortwick (2008) provides an example of the study of ancient masculinity as a social construction.

[7] The barbarian is discussed in current scholarship as a created, socio-political identity, and the processes and manifestations of constructing the Barbarian Other are themselves instructive, for example, Hall (1991), Hall (1997), Golden (1990) and Laes (2011) situate the study of children within the construct of childhood and the life-cycle.

[8] On emotion, see Braund and Most (2007); Konstan (2006). In his meticulous study, Harris (2001) provides a model of such scholarship in his detailed account of Graeco-Roman emotions that underlay displays of rage.

measurement for age-appropriate skill sets. But that does not change the reality of a persistent toddler standing right in front of me now, negotiating for my attention. Real as the toddler is, however, finding matches for this category in the ancient world would not be productive. Because the assumptions behind the category are skewed, any findings would be forced, retrospective coincidences. We do not advance scholarship by imposing modern understandings of social arrangements onto the records of past societies.[9] Similarly, mental illness is tangible and real, and mentally ill people were indeed part of ancient populations, but mental illness itself is not a useful cultural determinant. Terms implying mental illness were not accompanied by the set of assumptions about medical diagnosis and prognosis, sociocultural subcultures and therapeutic environments, and corrective options that characterise the institutional and medical approach. It is also important to note that mental illness (or chronic misbehavior, insanity, or madness) did not elicit the intervention of psychiatric teams, criminal justice, or pharmaceutical responses. In short, approaching any subject within the framework of Disability Studies encourages an inventory of assumptions about ability and disability just as the study of gender allows us to view masculinity and femininity as context-bound, shifting descriptors.[10]

2.4. *Entangled Assumptions*

In their chapter for this volume, Chris F. Goodey and M. Lynn Rose argue that the overarching descriptor of disability as either physical or mental is a product of modern, western concepts of measurable human dimensions. The mental/physical dichotomy is artificial, but it is deeply embedded in western thought, and because it is useful for us as an organisational tool.[11] Our attempt to understand the ancient world on its own terms must inevitably be from the perspective of our own. The mental/physical divide, artificial as it might be, must also be taken into account because mental disability as a descriptor, from documented intellectual delay to certifiable insanity, carries heavy social stigma, and thus there is little incentive for people with mental disabilities to identify themselves. The absence of intellectual and

[9] See especially Laes (2011) 77–100 for the concepts of ancient authors on the early years of life. Laes (2006) discusses the matter in Galen's works.

[10] Trenchard-Smith (2006) 2–17 provides a useful and succinct historiography of ancient 'madness'.

[11] See Goodey (2001, 2011) and Rose (2003) for the concept of disability as a community construct rather than an individual one.

psychiatric disability as a category of historical analysis among historians of the ancient Graeco-Roman world reflects its invisibility at large, even among groups of advocates and activists for disability rights. As Goodey and Rose also point out (pages 19–23), physical disability has received disproportionate scholarly attention.

Another feature of modern western scientific thought that must be disentangled from our investigation is the wide variety of classifications and ever-shifting measurement and definitions of mental disablement. The subcategories, such as the hundreds of diagnostic markers of the DSM (*Diagnostic and Statistical Manual of Mental Disorders*, entering its fifth edition in 2013), are so culturally bound and specifically measured that they cannot be applied in any useful way to the pre-modern world. Even in the modern world, the very measurements by which one is deemed intellectually sound, or not, change as rapidly as the name of the disease they purport to diagnose. Homosexuality, for example, was only removed from the DSM conditionally in 1974 and entirely in 1986.[12]

The third entanglement is the twentieth and twenty-first-century understanding that mental disabilities are intertwined with standardised special education, psychiatric institutional space, such as an asylum, and the fine distinctions between competent and incompetent thinking in legal codification. It is important to disentangle these features, the first two of which were absent as institutionalised fixtures in the ancient world. Standardised education rests on the assumption of malleable intellect; the institution implies identification and segregation. While Athenian legal cases involving issues of sanity and insanity appeared in the fifth and fourth centuries, and the law of the Roman Twelve Tables includes a case of imprecisely described insanity and consequential guardianship, fully codified laws about mental illness can only flourish in the presence of the first two factors.

3. The Galenic Corpus

3.1. *Antecedents: The Hippocratic Corpus*

Finally, having named several caveats, we can now turn to the ancient medical texts, the earliest of which are the diverse works known collectively as

[12] See Rogler (1997) for particularly insightful remarks on historical changes in the DSM and Ronson (2011) for a particulary colorful narrative. Toner (2009) 54–91 aptly applies this to the subject of mental health in ancient Rome.

the Hippocratic Corpus.[13] These works are enormously varied, sometimes contradictory, often elliptical and even cryptic. Because they include works by numerous authors written over several centuries, it is impossible to speak of a single Hippocratic approach or attitude to mental disorders. Nevertheless, for our purposes, it is possible to view the Hippocratic material as a moderately coherent body of evidence for early Greek medical practices. Later medical writers made the same assumptions and developed their own methods and theories against this more or less cohesive background. The Hippocratic Corpus is particularly useful as a starting point for examining the medical approach to mental disorders because in many treatises there is a notable lack of focus upon the disease as an entity but rather an emphasis upon treating the patient and observing symptoms with a view to prognosis.[14]

The experiences of the patient then, albeit through the eyes of the physician, are particularly visible in the many case histories which make up the bulk of the Corpus.[15] In addition, those distinctions, classifications and labels regarding aberrant mental states which emerge in the works of later medical writers, including Galen, were often attempts at finer distinctions and more systematic delineations of the several boundaries of the types of mental illness presented in the Hippocratic writing, distinctions not always delineated very clearly or with any great consistency.

3.2. *Galenic Approach*

Galen was admired as a scholar of deep understanding by the standards of his own day, and continues to be admired for his command over the medicine of psychology up to the present.[16] Galen does not present a coherent and systematic discussion of mental disorders per se. This fact perhaps reflects his focused interest in disease and its locii in the body and his consequent methods of diagnosis. As a result of this approach, the many comments describing aberrant mental states along with their aetiology and therapeutics are scattered throughout his works.

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[13] The collection includes works ranging from the fifth century BC through the second century AD.

[14] Smith (1979) 32–33.

[15] Mattern (2008) has produced an excellent disucssion of the rhetorical and philosophical context of such Galenic stories. In particular the Appendix B on pp. 172–202, listing 358 case stories has been most useful for this chapter.

[16] Jackson (1969) 365; on Galen's apparent lack of interest in mental disorders see Flashar (1966) 105 and Heiberg (1927) 31.

Galen approached disease not from an analysis of clinical symptoms but from an anatomical or physiological viewpoint; that is, in any given case of imbalance, he sought the anatomical structure that was influenced and affected so as to result in functional disturbances.[17] Any part of the body, including the brain, might be the locus of a disorder primarily or secondarily, that is by sympathy, with a primary disease elsewhere, as in the epigastric kind of melancholy, discussed below.[18] Galen approached disorders of thought processes and behaviours in the same way that he approached any disorder, by locating a culpable organ or system and analysing any imbalances of its qualities or humours that might be involved.[19] The key affected parts in mental disorders were, for Galen, the brain, stomach and heart. Together, this interactive system was the centre for all rational thought and the processor of sensation and movement; consequently disturbances of mental function might take the form of faulty perceptions and sensations or erroneous thought processes—and these latter could include disorders of imagination, intellect and memory.[20]

Some disorders, including mental disorders and memory loss in particular, presented a special challenge to Galen's approach because there were no visible physical signs to indicate clearly the affected part that he sought.[21] When the locus of the disorder could not be identified by physical symptoms such as swelling, pain or discharge, the only recourse, according to Galen, was to "discover the affected part by its damaged activity".[22]

Disturbances of the mind are primarily, although not exclusively, discussed in Book 3 of Galen's work *On the Affected Parts*, under the functions and

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17 Flashar (1966) 107–108 remarks that this anatomical line of approach leads Galen to neglect much that was present in earlier writers on mental diseases, particularly any kind of psychotherapy. Other discussions, e.g., Manuli and Begetti (1988), 117–152 of Galenic psychology and therapeutic technique refute this. On ancient psychotherapy; see Gill (1985). Although Galen's works are not discussed, Gill's observations on the medical, religious, and philosophical approaches to psychic illnesses are generally relevant.

18 Jackson (1968) 372.

19 Galen, *De locis affectis* 3 (8, 146 Kühn = S 75). Subsequent passages cited from this work will also be identified by the translation by Siegel (= S) except when noted otherwise.

20 Jackson (1969) 371; 366–371 for a concise account of aspects of Galen's physiology and pathology relevant for mental disorders; also see Siegel (1973) 163. The brain as the seat of reason: Galen, *De locis affectis* 3 (8, 159–169 Kühn); *De Hippocratis et Platonis decretis liber* 6 (5, 505–585 Kühn), May (1968) 229 and for discussion see Siegel (1973) 114–172.

21 Galen, *De locis affectis* 3 (8, 146 Kühn = S 75).

22 Galen, *De locis affectis* 3 (8, 147 Kühn = S 75); Galen, *De locis affectis* 3, 11 (8, 200 Kühn = S. 97). Elsewhere he also includes paraphrosyne, epilepsy and catalepsy. See Jackson (1969) 371; (1986) 249; Godderis (1987) 37–51.

diseases of the brain and spinal cord. His discussion here of symptoms and cases is fairly detailed and provides much of the substance of the summary of mental maladies which follows below.[23]

Galen held to the traditional categories of mental disorders, first seen in the Hippocratic writings, the canonical triad of ancient medicine: melancholy, mania and phrenitis. But his discussion also came to include other conditions in which the mind is primarily affected. In fact on the basis of both locus of affection and humoral aetiology Galen specifically groups together for discussion a number of disorders involving mental dysfunction: these may take the form either of loss of function, deficiency in function or distortion of function.[24] In many respects Galen brought nothing new to the discussion of mental illness except a clarifying, shaping and sharpening of some of the earlier categories of disease and their aetiologies.[25] Yet Galen's schematisation of mental disorders according to physiological principals was sophisticated and complex and had an enormous influence on medical classifications for centuries to come. Galen's propensity to integrate illustrative cases into his wider theoretical discussions is, of course, particularly useful for this study.

3.3. *Passions of the Soul and Other Omissions*

Galen, as we have seen, did not assume mental aberrancy when he began the diagnostic process; rather, he approached each methodically by determining the organ or system responsible for the dysfunction.[26] When no visible physical sign pointed to the affected part, the next step was to locate the affected part by its correspondence to some kind of damaged activity. Notably aberrant behaviour, disturbed moods or thought processes, and mental imbalance in general, pointed to the brain as a likely culprit, though, as we shall see, it was not the exclusive culprit; the spine and stomach also had agency. By this method—determining the locus of affection—Galen identified six core mental syndromes that were, more or less, distinct from one another in ancient perceptions.[27] We take up six major

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23 Jackson (1969) provides a particularly useful and comprehensive survey of Galen's writings on mental disorders. Heiberg (1927) 31–36 is still helpful to some extent. Siegel (1973), esp. 262–278 and Godderis (2009) 13–79 provide a good overview and analysis of Galen's works on psychology, psychopathology and nervous system function and diseases.

24 Jackson 1969, 371.

25 Flashar (1966) 107.

26 Galen, *De locis affectis* 3, 4 (8, 146 Kühn).

27 In addition to apoplexy (stroke), lethargy, phrenitis, mania, melancholy, dementia and memory loss, Galen used several terms for mental disturbance that were relatively unspecific,

syndromes in our discussion below: phrenitis, mania, memory loss, melancholy, epilepsy, and senility.[28]

We exclude from this discussion the group of mental disorders requiring therapeutic intervention that are found in the treatises concerning what Galen terms diseases, or passions, or errors of the soul (psyche).[29] Despite the quasi-medical tone of these works, Galen wrote them from the perspective of a moral philosopher rather than a physician. He clearly regarded this group of emotional and behavioural disorders as distinct from the mental dysfunctions that resulted from somatic disorders of the brain-body system. These passions and errors of the soul consisted in certain kinds of emotional states and wrong-headed attitudes viewed by Galen and some of his contemporaries as distinct mental disorders.[30] The passions he singled out as requiring therapeutic intervention were rage and greed, lust, fear, obstinacy, love of glory, lust for power, envy and grief; the main error of the soul, however, for Galen, consisted in the pretence of wisdom. Although he prescribed therapy for these conditions in the terms of medical rhetoric, the treatment he recommends is primarily educational, consisting largely of moral instruction under the guidance of an older, wiser and more restrained mentor, with the goals of self-knowledge, self-control and self-improvement.[31] We view these works not as medical texts but rather as user's manuals for the soul or as handbooks of practical ethics.[32] Here, we need to remind ourselves that the separation between disciplines and the distinction between science and the humanities, in addition to the separation of the body and soul are all modern concepts, and to repeat our belief that in trying to understand the Galenic texts, we must be mindful of this modern framework.

These diseases of the soul are not, in fact, aberrant in the sense we use: Galen finds them to be ubiquitous and firmly entrenched in most people's lives. Therapeutic treatment was, as always, available to the few elite who

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for example paranoia and paraphrosune. These terms were evidently used casually—similar to contemporary usage such as 'mad' or 'crazy'. They do not appear to have the status of diagnostic categories consistently distinguished for theoretical discussion.

28 Galen, *De locis affectis* 3 (8, 200 Kühn = S. 97). Elsewhere he also includes paraphrosyne, epilepsy and catalepsy. See Jackson (1969) 371; (1986) 249; Godderis (1987) 37–51.

29 Collected and translated with commentary in Harkins (1963); see Pigeaud (1981).

30 Harkins (1963).

31 Harris (2001) and Van Hoof (2010) provide excellent surveys on soul management and practical ethics in Roman times with ample references to Galen and other medical writers.

32 These treatises have been translated and extensively commented upon by Harkins and Riese (1963) and Godderis (2008).

were able—and willing—to pay for advice, but Galen was not optimistic about a cure: "the passions have increased in the souls of the majority of men to such a point that they are incurable diseases".[33] Such diseases as rage, fear, and greed stood out in Renaissance Galenism, as they do in the twenty-first century, but were not taxonomically separate in the classical Galenic writings. The diseases below, specifically phrenitis through senility, sometimes also contain a moral inflection, but Galen does not contextualise any of the terms by morality.

4. Syndromes, Symptoms and Causes of Mental Illness in Galen's Works

4.1. *Phrenitis*

The discussion of phrenitis provides a good example of how Galen approached an imbalance, how he determined its locus, and how he went on to categorise the malady. Galen identified two kinds of phrenitis, both of which he distinguished from simple delirium. One was caused primarily by brain disorder, the other, by a disorder of the diaphragm accompanied by secondary brain disorder. Galen distinguished phrenitis from mania in much the same way as his successor Caelius Aurelianus and other writers, by the presence of fever.[34] He also, more clearly than most other physicians, distinguished the delirium of phrenitis from fever delirium. Phrenitis, for Galen, was centred in the brain and meninges (the membranes of the brain and spine), whereas the delirium of fever arises from a condition centred elsewhere, and is sudden and short-lived:

> When delirium arises at the peak of a fever, the brain is affected by sympathy. But this does not constitute a specific disease [of the brain]; consequently [the patients] lose their wits [literally: strike a false note], are delirious and deranged [frenzied] as confirmed not only by physicians but even lay people. But we do not call these patients phrenetics (φρενιτικούς), because the delirium of phrenitis (φρενιτικαὶ παραφροσύναι) does not subside completely at the height of the fever.

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[33] Galen, *De propriorum animi cuiuslibet affectuum dignotione et curatione* 10 (5, 52 Kühn) (trans. Harkins and Riese).

[34] Galen, *De symptomatum causis* 2, 7 (7, 202 Kühn); *In Hippocratis praedictionum librum 1 commentarius* 1, 1 (16, 493–494 Kühn). Caelius Aurelianus, *Celerum passionum* 1, 42–51 (44–51 Bendz).

And Galen repeats that “the brain is not involved by sympathy during this disease (φρενῖτις) but by intrinsic disease (ἰδιοπαθεία) or primary seat of disease (πρωτοπαθεία)”.[35]

For Galen, delirium, on the whole, did not constitute a specific disease of the brain; instead, people affected by conditions that brought about delirium appeared to lose their wits, becoming confused and frenzied, as confirmed, Galen points out, not only by physicians but also by lay people. Galen goes on to distinguish these people from true phrenetics. In the case of the delirium brought about by phrenitis, the delirium does not subside completely when the fever reaches its height. The brain, in other words, involved not by sympathy but by intrinsic disease, is the seat of the disease of true phrenitis.

Phrenitis, Galen determined, develops gradually, without the sudden derangement that accompanies burning fevers centred in other organs. Symptoms that precede phrenitis include sleeplessness or sleep disturbed by “vivid hallucinations which cause the patient to shriek and jump up”.[36] At times the patient displays irrational forgetfulness, “when, for instance, the patients ask for the urinal but do not pass their water, or forget to surrender the urinal after having voided; or they give noisy and upsetting answers, particularly though they had previously been well-behaved”. Such patients, he goes on to generalise, drink little; their respiration is deep and fast; and when the attack of phrenitis takes hold their eyes feel dry, red, and bleary. Blood oozes from their nostrils and, as a sign that they are no longer sensible, they might pick at little pieces of wool or straw. Some have acoustic illusions, lying in bed with sad expressions on their faces, not answering questions to any extent. In addition, parts of their body may be painful or appear to be numb, even if, Galen noticed, someone were to touch the affected area with full force.[37]

Having distinguished between fever delirium and phrenitis, Galen then added a second kind of phrenitis for consideration, one “in which the diaphragm was primarily affected and the brain only secondarily”. In this condition, the delirium was almost continuous, but there were no symptoms present in the eyes or nose, and the respiration resembled a fever delirium.[38]

Elsewhere, Galen speaks of three types of phrenitis based on symptomatology; two simple kinds and a third kind which combined the two:

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35 Galen, *De locis affectis* 5, 4 (8, 329 Kühn = S. 148).
36 Galen, *De locis affectis* 5, 4 (8, 330 Kühn = S. 149).
37 Galen, *De locis affectis* 5, 4 (8, 330 Kühn = S. 149).
38 Galen, *De locis affectis* 5, 4 (8, 331–332 Kühn = S. 149). See also Jackson (1969) 373.

> Some people with phrenitis make no mistake at all in the distinction of visual impressions but base their judgement on an abnormal thought process. Others, on the contrary, do not commit any error of judgment but have a distorted sense perception. Still others happen to be affected in both ways.[39]
>
> Galen, *De locis affectis* 4, 2 (8, 225 Kühn = S. 107–108)

Here, the behaviour of one of Galen's patients, who was labelled as a phrenetic (φρενιτικός), readily illustrates an abnormal thought process, the first set of symptoms. This man started to throw his furniture out of the window of his house, all the while imploring the passers-by to command him to do so. According to Galen, the man was completely out of his mind (ἐγίνετο παραπαίων). But when he threw one of his slaves out of the window, Galen tells us, the initial amusement of the onlookers subsided.[40] Under similar circumstances of disease (i.e., a state of being out of one's mind), the physician Theophilus displayed the second set of symptoms: sensory distortion. Galen did not classify Theophilus as phrenetic; still, his symptoms illustrate Galen's diagnostic structure. Theophilus imagined a group of musicians in his house, relentlessly playing the flute day and night, while he, in turn, kept crying out to the people around him to order the group to stop their music.[41] Galen pointed out that in neither case did his patient lose other capacities. Theophilus, after his recovery, narrated his own hallucinations (φαντάσματα), while the man who threw out his furniture itemised the items correctly.[42]

4.2. *Mania*

In contrast to phrenitis and melancholy, which we discuss below, mania is given only brief and superficial mention in Galen's works. He considered it to be a chronic and primary disorder of the brain, differentiated from phrenitis by the absence of fever.[43] Although Galen identified the brain as the locus of mania, other parts of the body were thought to be involved. One indication of mania, for example, was that the vein throbbed in the elbow of one who had this condition, while in one who was delirious, the

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39 See also Galen, *De locis affectis* 4, 2 (8, 226–227 Kühn = S. 108).

40 Galen, *De symptomatum differentiis liber* 4 (7, 61 Kühn); *De locis affectis* 4, 2 (8, 225–226 Kühn).

41 Galen, *De symptomatum differentiis liber* 4 (7, 60–61 Kühn).

42 Jackson (1969) 373; Galen, *De locis affectis* 5, 4 (331–332 Kühn = S 149).

43 Jackson (1969) 376; Galen, *In Hippocratis praedictionum librum 1 commentarius 1* 1 (16, 493 Kühn).

vein was still.[44] Disturbances of reasoning power and hallucinations were the principle manifestations of mania, which by Galen's time, comprised a multitude of abnormal behaviours and corresponding mental states. Other ancient authors, not exclusively medical writers, would point to the vagueness of the term *mania*, which had indeed become an umbrella-term to denote all sorts of odd behaviours, including madness in general, love sickness in particular, and a range of episodic conditions from rage to divine inspiration.[45]

4.3. *Melancholy*

Galen's descriptions of the melancholic condition highlight the syncretic nature of his work as well as his views of a dynamic and interactive human system. Galen took much of his material on melancholy from Rufus of Ephesus, who predated him slightly, whose work he praised highly.[46]

Galen's own writings on melancholy are complex and, at times, even inconsistent.[47] The pseudo-Galenic treatise *On Medical Definitions* explains melancholy as a chronic condition, without fever, in which the mental symptoms were the secondary result of a disorder of the humours.[48] The Greek term, melancholy, means literally black bile, and an excess of this humour was the root of all melancholic conditions. Galen himself rarely used the term melancholy or melancholia as a noun, preferring rather to describe people as suffering from black bile (μελαγχολέσαντες) or a symptom as due to black bile (μελαγχολικόν).[49]

Galen describes a group of purely physical conditions which he termed melancholic, such as dropsy or elephantiasis, but he also discusses melancholy proper (melancholia), in which mood and behaviour were symptomatic. There were three kinds of melancholia based on the main locii

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[44] Galen, *Quod animi mores corporis temperamenta sequantur* 8 (4, 803–804 Kühn). Cf. Hippocrates, *Epidemiae* 2, 5, 16.

[45] See for example Aretaeus, *De causis et signis acutorum morborum* 3, 6, 1 (41–42 ed. Hude; CMG II: 2) claiming that there is just one mania but thousands of manifestations of it; Cicero, *Tusculanae Disputationes* 3, 5, 1 on the vagueness of Latin *insania* in juridical instances in the Twelve Tables. See Godderis (1987) 64–72. Michel (1981) and Pigeaud (1987) especially deal with the vagueness of the term mania.

[46] Jackson (1969) 374; (1986) 35–36; Flashar (1966) 84; Siegel (1973) 190–191.

[47] Jackson (1969) 374; Godderis (1987) 72–88. Galen discusses melancholy principally at *De locis affectis* 3, 10 (8, 180–193 Kühn). Melancholy also appears in a special treatise *De Atra Bile*, in the pseudo-Galenic *Definitiones medicae* 247 (19, 416 Kühn).

[48] Pseudo-Galen, *Definitiones Medicae* 247(19, 416 Kühn).

[49] Siegel (1968) 300–301.

principally affected: the entire mass of blood (with the brain secondarily affected), primarily the brain, or the hypochondrial area (a specific abdominal region and again with the brain secondarily affected).[50] These three categories can, however, be interpreted as three intensifying phases of the one disorder.[51] Galen agreed with Hippocrates that melancholy was in some ways akin to epilepsy and in fact could become epilepsy if the black bile carried by the blood accumulated in the ventricles of the brain and caused a blockage.[52]

Melancholy manifested physically, and physical characteristics aggravated it. People prone to melancholy, Galen observes, are in general lean, "with a darker complexion, much hair, and large veins", and he notes also that people with a very red complexion or even those with a fair complexion could develop melancholia under conditions of stress.[53] The epigastric type of melancholy (with its locus in the hypochondrial area), furthermore, was thought to befall young people frequently, and quite suddenly.[54]

Galen cites with approval the Hippocratic aphorism (6, 23) that "fear or a depressive mood (δυσθυμία) which last for a long time render [patients] melancholic".[55] Although fear and despondency characterise the melancholic patient, other symptoms, which can vary individually are often present. "Fear generally befalls the melancholic patients, but the same type of abnormal sensory images (φαντάσιον) do not always present themselves".[56] Galen explains how abnormal sensory images are manifest in the misbehaviour of certain men who did not seek treatment. One man, he records, 'believes that he has been turned into a kind of snail and therefore runs away from everyone he meets' for fear that his shell should get crushed; another, whenever seeing "crowing cocks flapping their wings to their song, he beats his own arms against his ribs and imitates the voice of the animals". Still another man, Galen tells us, was afraid that Atlas would become tired of

50 Jackson (1969) 374.

51 Galen, *De locis affectis* 3, 10 (8, 192–193 Kühn = S. 93–94); for discussion see Flashar (1966) 105–107.

52 Galen, *De locis affectis* 3, 9 (8, 177 Kühn = S. 88; 8, 180–181 = S. 89). Cf. Siegel (1968) 304–306 on Galen's linkage of melancholy, epilepsy and apoplexy; also Jackson (1973) 374.

53 Galen, *De locis affectis* 3, 10 (8, 182–183 Kühn = S. 90).

54 Galen, *De locis affectis* 3, 10 (8, 186 Kühn = S. 91).

55 Galen, *De locis affectis* 3, 10 (8, 188 Kühn = S. 92). See a similar description at *De symptomatum causis* 2, 7 (7, 202–204 Kühn). The aphorism appears in 4, 568–569 Littré.

56 Galen, *De locis affectis* 3, 10 (8, 190 Kühn = S. 93).

supporting the world and when he threw away the world, "he and all of us will be crushed and pushed together". And, Galen adds, "there are a thousand other imaginary ideas".[57]

Other Galenic examples of the disorders of melancholy include a man who imagined that he was made out of clay, and so avoided people's proximity, out of fear that he would be shattered. In even more dramatic accounts, we learn of a woman who was convinced that she had swallowed a snake, a man who believed that a dead man had addressed him when he passed a graveyard, and another man who accidentally farted in the presence of others; and as a result of his endless embarrassment, wasted away.[58]

Galen collected observational records of individual behaviours that were displayed both by his own patients and by people he observed. The narratives of the outlandish explanations for odd behaviour include an element of ridicule. We wonder, for example, how Galen drew his conclusions about the underlying causes of the man who thought he was a snail and could not bear to be among the company of people. Such stories must have had an element of pure comic entertainment. But, in the end, Galen is no sideshow barker. He is aware of the very real distress that underlies odd behaviour, as we see in his poignant conclusions about melancholy:

> Although each melancholic patient acts quite differently than the others, all of them exhibit fear or despondency. They find fault with life and hate people; but not all want to die. For some the fear of death is of principal concern during melancholy. Others again will appear to you quite bizarre because they dread death and desire to die at the same time.
>
> Galen, *De locis affectis* 3, 10 (8, 190–191 Kühn = S. 93)

In addition, beyond simply describing bizarre behaviour, Galen is mindful of the centuries of scientific observation upon which he builds. In the following passage, a continuation of the passage above, he reiterates two qualities central to the melancholic condition and critiques the Hippocratic understanding of melancholy:

> Therefore, it seems correct that Hippocrates classified all their symptoms into two groups: fear and despondency. Because of this despondency patients hate everyone whom they see, are constantly sullen and appear terrified,

57 Galen, *De locis affectis* 3, 10 (8, 190 Kühn = S. 93). See also a similar description at *De symptomatum causis liber* 2, 7 (7, 202–204 Kühn), and see Godderis (1987) 75 for other historical examples of delusion.

58 These anecdotes are only preserved in an Arabic translation. See *Galeni in Hippocratis epidemiarum librum VI, commentaria* I–VIII (487 Pfaff, Wenkebach) (CMG 5, 10, 2, 2). See Godderis (1987) 74.

> like children or uneducated adults in deepest darkness. As external darkness renders almost all persons fearful, with the exception of a few naturally audacious ones or those who were specially trained, thus the colour of the black humour induces fear when its darkness throws a shadow over the area of thought. Galen, *De locis affectis* 3, 10 (8, 190–191 Kühn = S. 93)

Galen also speaks of a kind of melancholy which he characterises as 'the bestial and melancholic delirium due to overheated dark-yellow bile.'[59] In related texts that followed Galen's style but were composed later, other more marked forms of hypochondriac imbalances result in symptoms including lycanthropy, the shape-shifting between human and wolf.[60] Evidently for Galen as for others through the following millennia, a very wide range of states indeed could fall under the category of melancholy, and it has been rightly stressed that 'the ancient diagnosis of melancholy has no correct analogue in modern psychiatric classifications.'[61] Such an observation holds true for the majority of the mental disorders in antiquity, and particularly for the ancient canonical three: phrenitis, mania and melancholy.

The following group of symptoms contains diagnoses more familiar to a modern audience. Memory loss, dementia and senility, even though they are not grouped exactly as they are in the DSM, lack such striking descriptors as the shadow of black bile that casts people into a desperate deep darkness.

4.4. *Memory Loss; Dementia; Morosis*

Memory loss occurs, according to Galen, often in conjunction with loss of reason, just as damage to the power of reason often results too in damage to the power of memory.[62] If both powers are lost together the resulting condition is called dementia.[63] Because of this it was considered particularly important to watch closely the sleep of those who had lost their memory or their intelligence for indications of abnormal somnolence which could lead to

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[59] Galen, *De locis affectis* 3, 9 (8, 178 Kühn = S. 88).

[60] Throughout pre-modern medicine, lycanthropy has been viewed as a form of melancholy. See Godderis (1987) 74–75 and Balin (2004).

[61] Siegel (1973) 274. Siegel, citing Diethelm, suggests that, for example, schizophrenic illness fell under mania or melancholy in antiquity while its catatonic form fell under a separate entity called catalepsy. Jackson (1969) 374, suggests the attempt to explain both the depressed and the "bestial raving" symptoms of the one disease, melancholy, by different actions of the atrabilious humor may indicate "an inclination among the ancients to seek connected, and yet separate, explanations for their equivalents of modern depression and mania".

[62] Galen, *De symptomatum differentiis* 3 (7, 62 Kühn).

[63] Galen, De *locis affectis* 3, 6 (8, 160 Kühn = S. 81).

dementia.[64] In addition to dementia, the conditions of lethargy and of coma-like sleep also involve loss of both memory and reason. Galen sometimes paired loss of memory and lethargy as equivalent conditions.[65]

In general, loss of memory was thought to occur as the result of 'emotion, deep thought, inebriation and phrenitis, in fear and in severe affections of the psyche.'[66] It is listed by Galen among those diseases which show no visible physical symptoms and which are discernible only by examination of loss of function.

Galen speaks of being called upon to restore the memories of several individuals and initially having to invent his own method of treatment.[67] It would appear that he averted memory loss by timely intervention on two occasions.

> I knew a person whose memory was nearly lost and whose reasoning power was damaged by overwork and lack of sleep during his studies … Another person, a vinedresser, was also affected in the same manner as the former patient because of a meagre diet during his labours in the vineyards.
>
> Galen, *De locis affectis* 3, 7 (8, 165–166 Kühn = S. 83)

Dementia (μώρωσις) or foolishness (μωρία) were conditions in which understanding (and with it memory) was significantly impaired through failure of reasoning power. A state of complete mental deficiency was *anoia*, which Galen described as a paralysis of the thinking faculties.[68] Such a condition could occur in senility as a result of abnormal cooling of the brain, or it could result from the harmful humoral influences on the brain as a result of profound phrenitis, lethargy or melancholy.[69] In accordance with other medical writers, Galen linked this type of dementia (*morosis*) with epilepsy, either resulting from it or accompanying it.[70]

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64 Galen, De *locis affectis* 3, 7 (8, 165 Kühn = S. 82).

65 See Jackson (1969) 376; Godderis (1987) 53 referring to Galen, *De symptomatum differentiis* 3 (7, 60 Kühn) and *De locis affectis* 2, 5 (8, 127 Kühn).

66 Galen, *De motu musculorum* 2, 6 (4, 445 Kühn).

67 Galen, *De locis affectis* 3, 5 (8, 147–155 Kühn = S. 75–78).

68 Galen, *De symptomatum differentiis* 3 (7, 60 Kühn). See Siegel (1973) 274–275; Godderis (1987) 53–57 on dementia.

69 Siegel (1973) 275, citing Galen, *Galeni in Hippocratis praedictionum librum 1 commentarius 2*, 96 (16, 696 Kühn). See also Godderis (1987) 53.

70 Galen, *De locis affectis* 3, 11 (8, 194 Kühn = S. 95) (by implication).

4.5. *Epilepsy*

Epilepsy was categorised by Galen into three types based on the area primarily affected, much in the same way that he categorised the melancholic diseases. In keeping with Hippocrates, he observed that under certain conditions epileptics could become melancholics and that melancholic people could become epileptics.[71] All forms of epilepsy "have in common an affection of the brain", and in some—the most common forms—the disease originates in the head. In others, the head is only secondarily affected in sympathy by the disease when it rises from the opening of the stomach.[72] A third and rarer type develops when the complaint originates in some other part of the body and then ascends to the head; at this point, the patient perceives the imbalance.[73] Galen elucidates the symptoms of this rare form of epilepsy in the following case histories, which also demonstrate his dynamic and cooperative approach to medicine:

> In my younger years I first observed this [epilepsy] in a boy who was 13 years old. I met with the best physicians of our country during a consultation about the treatment of this case. I heard the boy telling how his condition started at the shin bone, then went quickly up through the thigh and flank of the same side to the ribs and finally to the neck and head. After it had arrived there he could not observe it further. When one of the physicians asked him about the nature of this transfer to the head, the child could not give a reply.

Galen went on to describe another youth, with similar symptoms, who was able to describe his experience as a cool breeze of air rising to his head. Galen's teacher then analysed the case:

> My teacher Pelops believed that we are dealing here with one of two possibilities: either some quality is transmitted through adjoining organs which had suffered a metabolic change, or it is a vaporous substance. He said that it was not astonishing that a counter-natural humour which was produced in the affected part exerted a strong effect similar to the venoms of poisonous animals. Galen, *De locis affectis* 3, 11 (8, 194–195 Kühn = S. 94–95)

The second and more common form of epilepsy originates at the opening of the stomach, and, taking the descriptive name epigastric, is a sort of whole-body hiccup. Galen records his observations of one of his patients, and refers to his own experience to explain the phenomenon, which in this case was

[71] Galen, *De locis affectis* 3, 10 (8, 180 Kühn = S. 89).
[72] Galen, *De locis affectis* 3, 11 (8, 193 Kühn = S. 94).
[73] Galen, *De locis affectis* 3, 11 (8, 194 Kühn = S. 94). For a succinct medical analysis of Galen's diagnoses and theory of epilepsy, see Siegel (1968) 308–315.

bodily collapse followed by regular spasms. He compares the event to the hiccups, which originate in the stomach and occur at very frequent intervals.

> Sometimes, I instantly get hiccups when I indulge in eating too much pepper. This also happens to quite a few other persons who have a sufficiently sensitive opening of the stomach … I also observed that those epileptics who suffer from falling sickness by sympathy, but not by primary involvement of the brain, develop a kind of clonic[74] shaking spell which occurs at intervals but not in the form of continuous contractions. Therefore I can guess that a movement originates in the brain which is comparable to the annoyance which occasionally befalls the stomach.
>
> Galen, *De locis affectis* 3, 11 (8, 199 Kühn = S. 96–97)

The upper opening of the gastric cavity was, in Galenic thought, a common source of disorders. Such disorders, having arisen there as a result of some digestive irregularity, would move to the upper regions of the body and involve them sympathetically. The regions affected were usually the heart, oesophagus, the eyes and especially the brain.

Galen gives a detailed history of his treatment of a young student of literature who had epileptic spells after he studied intensely, forgot to eat, or when his emotions were upset. Galen assumed that the opening of gastric cavity (here the *kardia*) was sensitive, and, when irritated, caused his whole body to shake. The prescribed dietary remedy was, on the whole, a success.

> This patient survived on this regimen more than twenty years in good health. But on rare occasions when he was forced to remain without food because of urgent business, he was again attacked by very brief spells.
>
> Galen, *De locis affectis* 5, 6 (8, 340–341 Kühn = S. 152–153)

Elsewhere, Galen relates a similar case in which again a regime directed toward strengthening the stomach was recommended, this time to 'a certain grammarian … who was continually seized with epileptic convulsions, and he benefited greatly; and especially I hoped to help him, when I learned from him that the symptom of the convulsions occurred when he had remained a long time without food, and more when worry or anger supervened.'[75] Galen noted other people becoming prone to the epigastric form of epilepsy when they were under different kinds of stress such as indigestion, discomfort from drinking undiluted wine, and over-exertion in sexual activity.[76]

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[74] Tumultuous repetitions of muscle contractions and relaxations.

[75] Galen, *De sanitate tuenda* 6, 14 (6, 448–449 Kühn). Transl. Green (1951) 275. See also Mattern (2008) 114–116.

[76] Galen, *De locis affectis* 5, 6 (8, 341 Kühn = S. 153).

4.6. *Senility*

Finally, Galen's understanding of senility illustrates how the interaction of bodily functions produces behavioural variations. Galen determined that the state of old age itself was often accompanied by a loss of mental faculties. He compares old age to convalescence, in which the body is midway between health and disease.[77] Old age, a cold and dry condition, made the brain particularly prone to abnormal cooling; when this occurred, both understanding and memory were impaired and this impairment resulted in a state of senility.[78] Galen remarked on people forgetting the alphabet or even their own name in extreme old age.[79] The proper management of men in old age, according to Galen (women are not discussed), requires the physician's art of gerontology, and a description of the regimen conducive to healthy, long life is given in Galen's *De Sanitate Tuenda* (*On Hygiene*). He also provides case histories of two old men and notes specifically that the physician Antiochus cared for himself so well that he "continued until the last, unimpaired in all his senses and with all his members intact".[80]

5. Transcultural Mental Distress

From phrenitis to senility, Galen does not shrink from the experience of mental illness, which was and is very real, as real as the aforementioned toddler of our social construction. In the medical/psychiatric model of mental illness, mental disorders are thought to be rooted in the biological nature of humans, and, taking on definitions all their own, are seen to be fairly constant throughout time and place.[81] In attempting to understand mental disabilities there are dangers associated with using the medical model in which people are seen as broken or damaged and need to be fixed by experts. But the medical model can be useful, especially in instances in which clear evidence of a bio-chemical disorder has been indicated.

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77 Key passages for Galenic gerontology are Galen, *De marcore liber* 5 (7, 681–682 Kühn); *De Methodo Medendi* 10, 10 (10, 721 Kühn) and *De sanitate tuenda* 5, 4 and 6, 2 (6, 330 and 389 Kühn). Scholarly literature is again abundant, but Parkin (2003) 247–256 gives an excellent overview.

78 See Siegel (1973) 274–275; Parkin (2003) 228–230. Key passages include Galen, *Quod animi mores corporis temperamenta sequantur* 5 (4, 786 Kühn); *De locis affectis* 3, 7 (8, 165 Kühn = S. 83); *in Hippocratis praedictionum librum I commentarius III* 94 (16, 696 Kühn).

79 Galen, *De symptomatum causis* 2, 7 (7, 200–201 Kühn). See Parkin (2003) 265.

80 Galen, *De sanitate tuenda* 6, 4 (6, 333–334 Kühn). Trans. Green (1951) 202.

81 Kiev (1972) 1.

Cross-cultural psychiatric studies show, in contrast to the relativism of diagnostic labels, that among a variety of societies there are fundamental similarities in the symptoms which form the basis for judging a person to be mentally ill.[82] Jane Murphy concludes, in her study of several non-western cultures, that "almost everywhere a pattern composed of hallucinations, delusions, disorientations, and behavioural aberrations appears to identify the idea of "losing one's mind," even though the content of these manifestations is coloured by cultural beliefs".[83] The underlying processes of insanity, she argues, along with the disorders of memory, perception, and feeling, have some biological and chemical bases and are everywhere essentially the same.[84]

Yet problems of diagnostic boundaries lie in the more hazy realms of mental distress, with what North Americans might term neurotic behaviour, for here the question of bio-chemical involvement is problematical, the line between normal and abnormal elusive, and here especially we encounter cultural differences in categorising and responding to mental abnormalities. Even within the culture into which many of us were born, insanity is not easily distinguished from episodes of disturbance resulting from stages of life such as adolescence, separation, and dying. In general, every culture has limits of acceptable behaviour in these situations.

Culture and the individual interact and make an impact upon one another, and different societies tolerate different kinds and degrees of dysfunction in individuals, dysfunctions for which they may or may not have precise terms. People also have differing expectations with regard to those mental disturbances which arise in connections with life events: sickness, loss, adolescence, childbirth, menopause, or old age.[85] Although some conditions of mental imbalance have a biological, chemical or even genetic aetiology, and some key symptoms can be isolated that are universally observable in certain of the psychoses, socio-cultural elements play a major role in defining and influencing mentally aberrant behaviour.

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[82] Kiev (1972) 22.
[83] Murphy (1965) 1027.
[84] Murphy (1965) 1023, Kiev (1972) 1, 22.
[85] Kiev (1972) 20, Simon (1868) 31.

6. Conclusions

We now return to our epigram, from the psychiatrist and scholar Thomas Szasz's 1974 *The Second Sin*. The titles of Thomas Sszasz's works, such as the *Manufacture of Madness* (1970) and *Antipsychiatry: Quackery Squared* (2009) speak for themselves. The American Medical Association, the American Psychiatric Association and the National Institute of Mental Health formally reject Szasz's stance, and it is far beyond our proficiencies to appraise the medical validity of his work. For our purposes, Szasz highlights the coercive dangers of institutionalised authoritative language. As we have stressed throughout this chapter, such institutionalisation was absent from the records of the ancient medical writers. In contrast to the earliest Hippocratic records, the later medical writers, Galen included, made finer distinctions and delimited more systematically the several boundaries of mental illness, but not always with clarity and never with any great consistency. Ancient descriptive terms are based in observation, not diagnosis. In today's professional psychiatry, conversely, Greek and Latin terms give solemn diagnostic categories the appearance of scientific solidity, and medical observations fall in line with these diagnostic categories.

Disorders of behaviour can be recorded, grouped, and treated, but instances of mental disability in the Galenic Corpus are individual and relative to a situation. Specifically, and in conclusion, we summarise three points; First, ancient syndromes described do not fit into modern nosological categories. Second, there is great variation from one author to the next—and, in this case, within Galen's writings—among correspondences between symptoms and disease: fluidity is the rule, not the exception, for diagnosis. Third, mental disorders resisted classification in antiquity and they still do today, but twenty-first century practitioners have the semantic and taxonomic authority to persuade them to submit to classification.

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TWO HISTORICAL CASE HISTORIES OF ACUTE ALCOHOLISM IN THE ROMAN EMPIRE

Danielle Gourevitch,
with the collaboration of Dr. Gilles Demigneux

Il n'y a pas une civilisation qui n'ait trouvé sa ou ses solutions au problème de la boisson, particulièrement celui des boissons alcooliques[1]

1. Drunkenness, Alcoholism and Ancient History (*By Christian Laes*)

According to Pliny the Elder, the two liquids most delightful to the human body were wine for the inner part and olive oil for the outer. To him, wine was the Roman liquid *par excellence*, while beer belonged to the West (Gaul and Spain), and to Egypt.[2] The Romans were indeed strenuous consumers of wine. Consumption in the city of Rome has been estimated in the range of 146–182 litres per adult head per annum, with a possible increase in the second century CE. This works out at something like a modern bottle per day for adults—the same rate as documented consumption in other pre-industrial wine drinking societies. Moreover, wine was an affordable product, even for the less well-to-do.[3]

In the words of Pliny again, it is a dangerous product:

> If anyone will take the trouble duly to consider the matter, he will find that upon no one subject is the industry of man kept more constantly on the alert than upon the making of wine; as if Nature had not given us water as a beverage, the one, in fact, of which all other animals make use. We, on the other hand, even go so far as to make our very beasts of burden drink wine: so vast are our efforts, so vast our labours, and so boundless the cost which we thus lavish upon a liquid which deprives man of his reason and drives him to frenzy and

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1 Braudel (1979) 212.
2 Pliny the Elder, *Naturalis Historia* 14, 149–150.
3 Tchernia (1986); Jongman (2007) 603.

> to the commission of a thousand crimes! So great, however, are its attractions, that a great part of mankind are of opinion that there is nothing else in life worth living for.
>
> Pliny the Elder, *Naturalis Historia* 14, 137 (trans. J. Bostock and H. Riley)

This quote is just the beginning of a whole chapter on drunkenness and its inherent dangers.[4] It contains striking passages, such as the following admonition to heavy drinkers:

> And how many a man has met his death in this fashion! Indeed, it has become quite a common proverb, that "in wine there is truth." Should he, however, fortunately escape all these dangers, the drunkard never beholds the rising sun, by which his life of drinking is made all the shorter. From wine, too, comes that pallid hue, those drooping eyelids, those sore eyes, those tremulous hands, unable to hold with steadiness the overflowing vessel, consign punishment in the shape of sleep agitated by Furies during the restless night, and, the supreme reward of inebriety, those dreams of monstrous lustfulness and of forbidden delights. Then on the next day there is the breath reeking of the wine-cask, and a nearly total obliviousness of everything, from the annihilation of the powers of the memory. And this, too, is what they call "seizing the moments of life"! whereas, in reality, while other men lose the day that has gone before, the drinker has already lost the one that is to come.
>
> Pliny the Elder, *Naturalis Historia* 14, 141–142 (trans. J. Bostock and H. Riley)

Pliny then continues with historical examples of heavy drinkers, a catalogue that ends with the triumvir Marcus Antonius, who was said to have published a volume on his own drunkenness.[5]

An ample bibliography already exists both on heavy drinking and drunkenness, and on the possible existence of alcoholism in the ancient world.[6] Examples are abundant: from the Ancient Testament admonitions against heavy drinking,[7] to the Greek historiographer Procopius who wrote in the sixth century CE on Theoderic's grandson who drank too much, or about a general who lost selfcontrol due to "the disease of drunkeness".[8] From a

4 Pliny the Elder, *Naturalis Historia* 14, 137–148. See André (1989).

5 Pliny the Elder, *Naturalis Historia* 14, 148 (*de ebrietate sua*). See Marasco (1992).

6 For overviews, see Gourevitch (1991 a); D'Arms (1995); Clarysse (2001); Dalby (2003) 123–124. Both d'Arms and Clarysse are sceptical about the existence of alcoholism in the ancient world. See Gourevitch (1998) on addiction. Neither these studies nor the present article will engage with the vast field involving connections between wine consumption, drunkenness and Christianity, for which see e.g. Lançon (1990) and Bailey (2007).

7 E.g. Gen. 9, 20–27 (Noah's drunkeness); 1Sam. 25, 36–38 (Nabal's drunkeness); Tob. 4, 15; Prov. 23, 20–21; 23, 29–35; Sirach 31, 25–31; Jes. 5, 11–12; 19, 14; 28, 7–8 (severe admonitions agains overindulgence and drunkeness due to wine).

8 Procopius, *De bello Gothico* 5, 3, 10 (Theoderic's grandson); 7, 27, 5 (νόσῳ μέθης ἀνειμένος).

socio-cultural point of view, John D'Arms has opened many interesting perspectives. While ancient writers, especially moralists, were keen to condemn excessive drinking as damaging to the social order (surely in the case of rulers lacking self-restraint), ancient society undoubtedly condoned inebriation on certain occasions (the Saturnalia, *convivia*, victories).[9] For the upper-classes, drinking was very much a matter of etiquette and social decorum. It was also learned behaviour that teenagers would acquire in their peer group of *iuvenes*. Among the lower classes, too, there seems to be sufficient source evidence for heavy drinking and the outrageous conduct caused by it.[10]

As regards the subject of doctors and wine, D'Arms advocates great caution in ascribing alcoholism to the ancient world. It is exactly the subject of doctors and their relation to heavy drinking and alcoholism that will be scrutinised in this paper.

2. Greek and Roman Addictions

For the present chapter, I have chosen to comment upon two cases of heavy drinking by two young people that resulted in their deaths, dating back to the Empire. Both are narrated in Greek, occur in the same region of the world and are from the same period. The first is inscribed on his epitaph and dates from the second century CE, as does the second, which is described and commented upon by Galen. The inscription has no scientific pretensions; the case is reported naively and straightforwardly, without any medical intent (though possibly with a philosophical one). If it were represented pictorially, it would permit what Grmek and I have called "iconodiagnosis" and would represent something far removed from the common medical ideas of the time (although of course no description can be absolutely pure—see also Alex Mitchel, p. 282 in this volume). The Galenic passage is on a different level, since the famous physician was seeking to use it as a way of explaining his theory, by basing it on a precise case; so too are some Hippocratic passages on the same theme.[11] There is possibly a third level, since Galen commented

9 Cf. the Horatian *nunc est bibendum* (Horace, *Odes* 1, 37, 1). On Horace and occasions in which inebriation was permitted, see La Penna (1995). Cf. *CIL* VI 19055 (second century CE), in which a man praises his deceased wife for the fact that she liked to have fun and drink wine (*Bacchoque madere*).

10 D'Arms (1995) 304–308 (drunkeness and *decorum*); 308–312 (drinking and childhood); 312–314 (socio-economic aspects of drinking). Cf. Ammianus Marcellinus, *Res Gestae* 14, 6, 25 on "bibulous Rome".

11 Gourevitch (2005).

upon Hippocrates; this means we can try to understand how and to what extent Galen differs from Hippocrates, despite the latter having been his master. A fourth level would be that of retrospective diagnosis, a very difficult intellectual adventure, as Lutz Alexander Grauman explains in this volume. First, however, I will give a brief survey of Roman addictions.

Ancient addictions may come into play as a religious phenomenon, as social phenomena, and as a medical problem. The substances concerned are wine (the main alcoholic drink available), opium, and certain medical concoctions. In the Roman period, for instance, we know of two such patients. One was famous: the Emperor Marcus Aurelius who, unable to do without the daily theriac which Galen specially prepared for him, nevertheless ignored this problem, though sometimes it meant he could not sleep or slept at inappropriate moments.[12] The other was again an anonymous adult patient of Galen's, a drug-addict who enjoyed his pills and persistently lied about it, even though he knew nobody ever believed him: the anecdote is really a pathognomonic one.[13] As for wine, the emblematic figure throughout Antiquity was Lycurgus, a king of Thracia and victim of Dionysus, who is depicted in art-forms of every kind to indicate that wine is both pleasant and dangerous and the drunkard both fascinating and repulsive; this is especially true of the female drunkard (nurses included), while males are often represented vomiting, peeing or worse.[14] And as for group drinking, this does exist, both in religious celebrations and private feasts; but the state never interferes.[15] Given this context, what about the young man in the first of our two cases?

3. Asclepiades, the Son of Anaxippos

The following Greek imperial inscription was found in Chalkis, on Euboea. It was first published in *Archaiologikon Deltion* 28, 1973, Chronica, p. 1, then studied by Meillier (1980) and Vérilhac (1982). No photograph is available. Here it is after its revision:

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[12] Galen, *De antidotis* 2, 17 (14, 201 Kühn); *De theriaca ad Pisonem* 2 (14, 216–217 Kühn). See Gourevitch, Gourevitch (1983 a).

[13] Galen, *De praesagitione ex pulsibus* 1, 1 (9, 218–220 Kühn). See Gourevitch, Gourevitch (1983 b).

[14] On Lycurgus, see Dalby (2005) 65–71. On the image of the drunken nurse, see Joshel (1986) 9–10.

[15] Nencini (1997 c); Charlier, Prêtre (2011).

Ἀσκληπιάδης
Ἀναξίππου
Ἐφέσιος
εἴκοσι καὶ δῦ ἔτη ζήσας πολὺν οἶνον ἀπνευστί
ἄκρατον πίνων αἷμ' ἀνάγων ἔθανον
υἱὸς Ἀναξίππου κληίζον μ' οὔνομα Ἀσκληπιάδην
καὶ πατέρων ἦν γένος ἐξ' Ἐφέσιου

I, Asclepiades of Ephesus, son of Anaxippos, lived for 22 years: I drank a great quantity of undiluted wine, spit blood and choked to death. The son of Anaxippos, my name was Asclepiades and the race of my ancestors from Ephesus. *SEG* 27, 571

Asclepiades was only 22 when he suddenly died; the family said he drank, spit blood and choked to death, and that's all. The present participle πίνων is intriguing: does it mean he did it just once, on his untimely death; or does it mean he did it habitually, as part of his usual way of life?

First of all, we must reject Vérilhac's interpretation. Since wine was also considered a remedy, she thinks the cause of the death could have been inappropriate treatment, the doctor having administered wine in too great a quantity or strength. This is not medically probable, as a doctor of the time would have been aware of these risks. It is true that doctors are sometimes accused, but the fault is then clearly highlighted, as in the cases of a young man of 27 who was killed by his doctors (or rather his surgeons), and of a young boy of five in the famous bilingual inscription from Nicomedia.[16]

We may be looking, rather, at a digestive haemorrhage, following heavy ingestion of a large quantity of wine with a high alcohol content. At first sight this could either be a case of Mallory-Weiss syndrome, or of "binge-drinking" (not a medical notion but a journalistic one). The former, a gastro-oesophageal laceration syndrome first described in 1929 by G. Kenneth Mallory and Soma Weiss with fifteen alcoholic patients, involves the aspiration or inhalation of vomit, a profuse discharge of bloody matter due to a sudden peeling of the mucous membrane, though people usually think of this as pure blood. The condition may indeed be fatal. The trouble with such a diagnosis is that patients suffering from it are generally inveterate drinkers, while the dead man was in fact young. So ours may be a very special case, which could also explain why the family who paid for the slab and inscription were willing to explain the reasons for the death; it is somewhat detrimental to the young man's memory, but they sought to prevent it happening to

16 *ILS* 9441: *quem medici secarunt et occiderunt*; and a young boy of 5; *CIL* III 14188: τμηθεὶς ὑπὸ ἰατροῦ *praecisus a medico*.

anyone else. Accusing the dead man of being the cause of his own death is a *unicum*.[17] This is why, at first sight, 'binge-drinking'—heavy episodic drinking with the primary intention of getting drunk with companions—could also be the explanation. However, we do not know if he had been drinking with friends, and obviously the poor chap was unfamiliar with the risks. Many experts today will say how extremely important it is to warn people of the risks of drinking. This epitaph might be still useful, with its very striking wording which places the name of the guilty victim at both the beginning and the end.

4. The Young Slave of a Teacher

In *De locis affectis*, Galen expresses interest in the relationship between heavy drinking under certain special circumstances and the suffering *locus* (τὸν πεπονθότα τόπον), together with the causes of its condition (τὴν βλάπτουσαν αἰτίαν), namely a diseased head (τὸν παραφρονοῦντα τόπον), with delirium (παραφροσύνη) and lack of sleep (ἀγρυπνία). As he so often does, he describes a special case from among his own clientele to lend the theory greater strength and significance.[18] In book 2, chapter 10, he discusses a teacher's παιδάριον, as a way of conveying to his audience a "useful" story (τὸ χρήσιμον τῇ ἱστορίᾳ):

> Light diet and the drinking of undiluted wine prevent sleep, the more so when the wine is undiluted and naturally warm, or certainly old; a case like this once happened with us in Pergamum, and it would be good to run through it. It concerned a teacher's young slave.[19] Every day the teacher would go to the baths with one of his two slaves, leaving the other locked inside to guard what was in the house and get the meal ready. On one occasion the other slave got extremely thirsty, and there was no water indoors. He started to drink great quantities of old wine and thereafter remained wide awake, became feverish for lack of sleep and died from the ensuing delirium.
>
> Galen, *De locis affectis* 2, 10 (8, 131–132 Kühn = Siegel 68–69)

Galen knows from his own experience that undiluted wine does not quench thirst: "I remember that once, on a day when travelling (ὁδοιπορία) in summer had made me thirsty, I drank within a short space of time (βραχύ) just

[17] In inscriptions, the ancients seem much more preoccupied with sudden deaths that are accidental or even bizarre. See Laes (2004). See e.g. Pliny the Elder, *Naturalis Historia* 7, 180–187 on sudden death.

[18] Gourevitch (2005 a).

[19] For the different periods of life according to Galen, see Gourevitch (2001); Laes (2006) and (2008).

one (μίαν) cup of old wine, almost neat, and that, instead of relieving my thirst, it intensified it instead".[20] According to him, children certainly do not need wine at all, and when despite this they do drink, "they only get some problem (βλάβη) out of it. Therefore no sensible man should incite (ἐπιτρέπω) children to use such a drink, which does no good and has even bad consequences (ἐφεδρεύω)".[21] A normal beverage for this boy would certainly have been water, with probably (considering that he was not a small child) an occasional drop of cheap light wine in it, just to counteract any contamination.[22] And since there is no reason here, apart from uncontrollable thirst, to imagine a previous pathological state aggravated by wine, nor anything wrong with the wine itself[23] (fraudulent adulteration, for instance[24]), the most probable pathological sequence is as follows: acute intoxication,[25] together with alcoholic hepatitis and encephalitis, in a young patient who was insufficiently or incorrectly nourished. Such a condition can develop suddenly and severely without any previous euphoric phase: dead drunk. It is interesting to note the sociological context: that of a boy locked inside, in the hot summer of Pergamum which can reach above thirty centigrade, without the usual things to drink. One solution would have been to cheat, drinking the forbidden liquid very quickly and hoping nobody would find out.[26] It is not a case of binge-drinking either, for the incentive was simply to quench his thirst, not to become intoxicated as quickly as possible in order to share a dark nothingness. Modern readers may find it strange that Galen does not question the master's responsibility in this, even though he was generally interested in "regimen" for slaves[27] as well as for the free-born.

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20 Galen, *In Hippocratis de acutorum morborum victu liber et Galeni commentarius* 4, 1 (15, 736 Kühn). Cf. Gourevitch, Grmek (1986) 60.

21 Galen, *De sanitate tuenda* 1, 11 (6, 55 Kühn).

22 Aristotle, *Politica* 1336a2–24 advises giving a little wine to a two-year-old child. See Laes (2011) 81 on the possibility that wine was consumed in small amounts by children.

23 Jacques (1996).

24 Although this may happen: Galen, *De probis malisque alimentorum succis* 11 (6, 805 Kühn = CMG v: 4, 2, 423): the καπηλεύων or retailer does not hesitate to add forbidden products to a sour πικρόν wine, in order to hide its very sourness. We know this happened sometimes with grain too, in cases of famine: cf. Gourevitch (1991 b) and (2005 b).

25 "In a short space of time" does not satisfy the modern reader: in fact Roman medicine is not very keen on measuring (except in the preparation of dangerous medicines). See Gourevitch (1996).

26 Another to simulate, another way of cheating. See Gourevitch (1975).

27 For the respective responsibilities of master and slave for the latter's health, we may recall for example that Marcus Aurelius stopped his working day early enough to let his slaves go to the bath (*De sanitate tuenda* 6, 7 (6, 406 Kühn)). However, not all slaves are intelligent enough to make the best of this opportunity: they do not take care of their bodies, they do not

It may be useful to emphasise that while ancient wines were generally very unstable (they could taste badly of pine resin and smell of smoke[28]), they did not become dangerous *ipso facto*;[29] water at that time was often more dangerous. As for the vessels, whatever their size, they were made of clay, hence their general name κεράμια. True, they might have held another liquid before, but people were very careful not to re-use them if they smelt or had previously contained something toxic. The taps (made of small branches κολυμβαῖ, στοιβή, or from a piece of a broken amphora) presented no danger either.

5. Back to Hippocrates?

This is not the place to trace the whole route back from Galen to Hippocrates. We will ask just one question: do Galen's description and explanations differ from those of Hippocrates? With this aim in mind, we have chosen two cases from the *Epidemics*, although "Hippocrates" does not mention the patient's age and does not attempt a diagnosis; keeping track of the various phases, the text remains content with mere description, and is almost free of any pathogenic explanation. One belongs to the first series (I–III), the other the second (V–VII). First a certain Charion, in Thasos, in Thracia, west of Samothracia.[30]

> … lying at Demaenetos', had an intense fever after drinking (ἐκ πότου); then his head was heavy; he could not sleep; his belly did not work, he had light and bilious excreta. Third day: acute fever, shaking (τρόμος) of the head and especially of the lower lip; soon after shivering (ῥῖγος); convulsions (σπασμοί); hallucinations about everything; difficult night. Fourth day: the patient was quiet. Hippocrates, *Epidemiae* 3, 2, 5

The whole story lasts twenty days. Galen did not comment on the case; and Littré thinks the patient did not die because he was naturally purged by the quantity of his urines and bilious excreta, which today does not seem very convincing.

go to the bath, they eat and drink too much (*De sanitate tuenda* 6, 7 (6, 415 Kühn)) and become permanently handicapped with podagra, nephritis, arthritis and so on. See Gourevitch (1987).

28 Galen believed that a smoky taste causes headaches.

29 On the use of wine to ameliorate and preserve, especially in Pergamum (as his father used to do), see Galen's *De bonis malisque sucis* and *De antidotis*. And cf. Jacques (1996), who does not seem to know Ieraci Bio (1987).

30 Y. Grandjean, Fr. Salviat, *Guide de Thasos*; *coll.* Fr. Blondé, A. Coulié, B. Holtzman … [et al.]; fig. and maps by M. Wurch-Koželj, *coll.* T. Koželj.—2nd ed., Paris, De Boccard, 2000.

Another case is that of Timocrates. This took place in Elis, on the Peloponnesian peninsula.

> Timocrates in Elis had drunk too much (ἔπιε πλέον); because of black bile he became maniac (μαινομένος); so he had to take the medicine (φάρμακον). He evacuated, abundantly, phlegma and black bile. So was it during the day. At the end of the day, the purification stopped. He suffered much during the purification, and after drinking water withflour he went to sleep, and slept the whole night, until the sun was very high. While he was sleeping the assistants thought he was not breathing at all but dead, he did not feel anything at all, neither any word nor any act; his body became tense (ἐτάθη) and frozen (ἐπάγη). The patient survived and awoke. Hippocrates, *Epidemiae* 5, 2[31]

According to Jouanna and Grmek the state of deep sleep should be attributed to the wine the patient drank, plus the medicine he was given (hellebore). Therefore no diagnosis is possible.

Every doctor knew the main symptoms and every *locus dolens*: the stomach, or more precisely the mouth of the stomach;[32] the head, which was more strikingly affected ("some happen to have a permanent headache, from drinking too much wine in a short time, or undiluted wine, and the more so if it is hot by nature"[33]); and certain smells. The Hippocratic tradition has among its many external causes for headache, "heat from coal or drinking wine";[34] and in a passage on the harmful effects of wine (τὴν ἀπ' οἴνου βλαβήν) we learn that it is unsafe "to drink wine out of season (οἴνου πόσις ἄκαιρος)", for then the pulse becomes bad.[35] But the keyword everywhere is the verb πίνων; this kind of drinking is seen as an acute danger. "Hard-drinking" never means too much water, always too much wine; this is absolutely clear to everyone. Some people become delirious when they drink like this, their heads gorged (πληρόω) with blood and hot pneuma. In such circumstances the patient becomes hot: especially the head, but also the body as a whole. Among those who suffer from both delirium and shivering (ῥίγος), natural heat is not inflamed (οὐκ ἐξάπτεται) but on the contrary is quenched (σβέννυται) because of its very quantity, just as much timber is quenched

31 See the edition by Jouanna-Grmek, pp. 2–3 and note about 'coma'.

32 For this terminology in Greek and Latin, see Gourevitch (1976) and (1977).

33 Galen, *De locis affectis* 3, 13 (8, 216 Kühn).

34 Galen, *In Hippocratis praedictionum librum I commentarius* 1, 8 (16, 531 Kühn).

35 Galen, *De praesigatione ex pulsibus* 1, 4 (9, 249 Kühn). Galen also wrote three other books on pulse, *De pulsuum differentiis* (8, 493–765 Kühn), *De dignoscendis pulsibus* (8, 766–961 Kühn), and *Synopsis librorum suorum de pulsibus* (9, 431–549 Kühn), as well as a lost commentary in 8 books on Archigenes' sphygmology.

by the fire itself, or the flame of a lamp (λύχνος) by oil poured (καταχέω) suddenly and in great quantity (ἀθρόως).[36]

6. Conclusion

Ancient medicine was coherent and astute about alcoholism. It knew of the very serious hazards engendered by excessive drinking. It knew which of the main sets of organs in the body were endangered: the digestive system, the neurological system and the "head". It knew about the heavy psychological effects, including desocialisation.[37] The fascinating and frightening myth of Lycurgus was still present on Roman mosaics, like the famous one in Sainte-Colombe near Vienne in France.[38] I have based my study on two case-histories, that of probably a teenage boy and that of a young adult. For a truly medical appreciation of the problem of alcoholism in the Roman world,[39] other case-histories need to be carefully scrutinized. One important point, at least, may be emphasised. Just as podagra is considered to be punishment for an unbalanced life,[40] drinking is a social behaviour.[41] A medical history of excessive drinking is necessary but not sufficient. It must be coupled with a sociological and philosophical history of the phenomenon, which is often connected to aristocratic concepts of temperance. According to Horace, a good master is "one that could excuse his slaves and not get frantic if the seal of a flask got broken", and "if you drink wine wisely (σαφῶ)" then it will alleviate any ill-temper and melancholy,[42] and you will never get drunk. The ancient historians are an important resource, supplementing the rare sociological details that appear in the books of ancient doctors, as in Galen's comment about pathological hunger and thirst: "(some patients) suffer from an unquenchable thirst, and I know they may die of it … (as for instance) a patient inebriated from drinking old wine".[43]

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36 Galen, *Hippocratis aphorismi et Galeni in eos commentarii* 7, 7 (18, 1, 107–108 Kühn).

37 Galen, *De sanitate tuenda* 1, 11 (6, 55 Kühn). See Eknoyan (1988) for an account of ancient nephrology.

38 Dunbabin (1999) 78.

39 For the Hippocratic world see *Epidemiae* 1, 27, 2; 1, 27, 8; 3, 1, 4; 3, 1, 5; 3, 17, 10; 3, 17, 16; 5, 2; 5, 81 (the flute-player); 7, 86, kindly chosen by Lutz Alexander Graumann.

40 Gourevitch (1987).

41 Gourevitch (1974).

42 Horace, *Epistulae* 2, 2, 135–136 (*posset qui ignoscere servis/ et signo laeso non insanire lagoenae*); Galen, *Quod animi mores* 3 (4, 777 Kühn). See Menghi (2009) on the ethics of temperance.

43 Galen, *De symptomatum causis* 1, 7 (7, 135–136 Kühn).

So is the inability to refrain from drinking alcohol a disability or not? Throughout Antiquity, doctors distinguished between acute alcoholism and habitual alcoholism. The latter is certainly not a *vitium*, that is to say not a stable bodily disposition, *habitus corporis*; it is not for doctors to cure, and is almost not a medical problem. It can simply be made lighter and more tolerable in some cases, if the patient so wishes. Habitual drinkers can be found in ancient literature: from old Leaena, the doorkeeper in Plautus' *Curculio*, to Saint Augustine's mother Monica, who developed a habit of drinking and thus came close to *vinolentia*.[44] Papyri, too, reveal some habitual drinkers.[45] Acute alcoholism on the contrary is certainly a disease (Greek feminine νόσος, Latin masculine *morbus*). Doctors have to react immediately. They fight it by means of remedies and diet, though only if the patient asks the doctor to do so. Here we encounter the famous Hippocratic triangle: the patient, his disease and his doctor. In the cases presented above, the disease lasted too short a time for anything to be attempted. Both patients certainly suffered from what we may call a "social disability" (a "social disease", to quote *West Side Story*), in the sense that they were unable to cope with their problems. The free man was unable to stop drinking once he had started. The young slave probably did not even know that he should not have drunk wine, since wine does not quench thirst; and in a way, contemporaries might have thought that his master was responsible for his death, because he knew the risks but did not leave any drinking-water. True, neither of these two cases would nowadays be labelled as alcoholism. Only in 1956 did the American Medical Association designate alcoholism a "disease" or "illness"; in 1980 it became considered "a handicap" or "disability" by the same organisation.[46] But the ancient physicians' accounts were of acute instances, in which they had to react immediately and in the same way as they had to intervene instantaneously when a patient who was a habitual drinker ended up in a life-threatening situation. Ancient acute cases are clearly modern acute cases, but anything else needs to be supplemented with a historical/sociological approach and a redrawing of category boundaries. Nowhere more than in the history of ancient alcoholism does "disability" seem to be an umbrella term.

44 Plautus, *Curculio* 77–79; Augustine, *Confessiones* 9, 8. Discusses in D'Arms (1995) 315–316.

45 Clarysse (2001) 165 cites *P. Vindob. Tand.* 2, line 9 and *P. Abinn.* 28, lines 8–15.

46 References in D'Arms (1995) 315.

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EXPLORING VISUAL IMPAIRMENT IN ANCIENT ROME

Lisa Trentin

1. Visual Impairment in the Classical World

Blindness and varying degrees of visual impairment were widespread in the ancient Greco-Roman world. But how did the ancients understand visual impairment? How did they explain the causes and effects of blindness (medically, socially, and religiously)? What accommodations, if any, were made for individuals experiencing loss of eyesight (care, employment, accessibility)?

Although scholars have long studied the prevalence and significance of blindness in Classical antiquity, this work has focused largely on evidence from the Greek world.[1] This is not surprising. Blind poets and seers are popular in the myth, epic and tragedy of ancient Greece, and the most well-known blind figures of antiquity (arguably of history) are found here: the blind bard Homer, the blind seer Teiresias and the blind king Oedipus. It follows that modern scholarship on blindness focuses a great deal on these famous characters and their place in extant Greek literature. In 1980 Richard Buxton's article "Blindness and Limits: Sophokles and the Logic of Myth" explored blindness in Sophoclean tragedy against the background of the whole Greek mythical tradition.[2] A decade later, Bernidaki-Aldous' seminal monograph *Blindness in a Culture of Light* investigated Greek attitudes towards blindness and the blind as well as the recurrence of blindness on the Greek stage, with particular reference to Sophocles' *Oedipus at Colonus*.[3] Most recently, the section on "Eye-Sight/In-Sight" in *Light and Darkness in Ancient Greek Myth and Religion* shifted focus away from Greek tragedy and especially Sophocles, to think more widely about the cultural ambiguity of blindness in Greek

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1 See Buxton (1980); Bernidaki-Aldous (1990); Rose (2003); Kelley (2007); Létoublon (2010) and Tatti-Gartziou (2010). A notable exception is Vlahogiannis (1998) 13–35 who gives a more well-rounded discussion of "disabling bodies" in both Greece and Rome.

2 Buxton (1980) 22–37.

3 Bernidaki-Aldous (1990) 5.

literature.[4] Françoise Létoublon's contribution to this section, "To See or Not to See, Blind People and Blindness in Ancient Greek Myths", adds to the works of Buxton and Bernidaki-Aldous but concentrates principally on archaic poetry, with arguments firmly anchored in linguistic data; Ariadne Tatti-Gartziou's contribution, "Blindness as Punishment", examines divine punishment in connection with ideas about Greek law. It is worth mentioning that all these works examine the *representation* of blindness, i.e. how the blind were presented in Greek literature. Although less concerned with the condition(s) of the blind in everyday life, conclusions are occasionally drawn, with caution; a more systematic examination of the "real lives" of the blind (and of disabled people more generally) can be found in the work of Martha Rose.

Rose's 2003 pioneering monograph *The Staff of Oedipus, Transforming Disability in Ancient Greece* examines the ancient Greek material on physical disability through the lens of disability studies. Rose challenges "assumptions about the place of people with disabilities in the present day which have coloured, often falsely, our interpretations about people with disabilities in the ancient world" and have been used to "bolster modern discriminatory attitudes towards people with disability, giving the attitudes an apparent historical precedent".[5] In her fifth chapter, entitled "Degrees of Sight and Blindness", Rose argues against the prevalent notion that blind people were segregated and alienated and that theirs was a "fate worse than death".[6] She suggests instead that "the story of blind people in the ancient Greek world is neither glorious nor dismal and that blind people were far from exceptional".[7] Examining a wide range of literary sources (from medical texts to philosophical treatises and epic poetry to historical narratives) she convincingly demonstrates that one can gather information, indirectly, about the daily life of ordinary blind people; she elucidates their visibility in ancient Greek society, noting that "... in the ancient world, sighted people knew blind and sight-impaired people well enough to understand the abilities and limitations of failing vision and that there was not the cultural gulf between the sighted and the blind that exists today".[8]

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[4] Part III: Eye-Sight/In-Sight, in Christopoulos, et al. (2010) 167–190.

[5] Rose (3003) 2. Furthermore, she concludes on p. 94: "The quantitative modern understanding of blindness twists the ancient Greek tales of blindness as underpinnings for discrimination against blind people in the modern world".

[6] As claimed by Covey (1998) 192; see also French (1932) and Lowenfeld (1975) 14 for similar statements.

[7] Rose (2003) 79.

[8] Rose (2003) 93.

Using Rose's work as a springboard, this chapter sets out to redress the balance on the study of blindness in Classical antiquity by shifting the emphasis to ancient Rome.[9] Like Rose, I will examine a wide range of literary sources through the lens of disability studies to think about everyday life for the visually impaired Roman. Specifically, I set out to examine the reported causes of visual impairment resulting from disease, injury (either accidental or intentional) and old age, and evaluate how these accounts feed into a well-established discourse on vision and its importance in the Roman world. In so doing, I consider the implications of being visually impaired in ancient Rome. As a visual culture, the Romans thought (and wrote) about 'the gaze' more intensely than any other in antiquity. Given the importance of spectacle and performance and the related emphasis on looking and being looked at, loss of sight had a significant effect on the way in which an individual was viewed by members of the community, and, of course, on the way in which s/he viewed the community, too. How then did individuals with limited vision or none 'fit' into this visual society? The sources suggest that individuals thus afflicted compensated by capitalising on senses other than sight. Moreover, they demonstrate that accommodations for individuals with failing vision were in place. It will thus be shown that visual impairment in the ancient Roman world was a common enough condition to which people could and did adjust, supported by their family and society at large.

1.1. *The Ancient Roman Evidence*

Evidence for blindness and visual impairment (and disability more generally) in the ancient Roman world comprises a patchwork of incidental information where reference is rarely overt. Although our knowledge is derived from a wide variety of sources—archaeological, medical, literary, and visual—this present inquiry will focus on the literary record, for it is here that the evidence

9 Few studies have examined blindness in the ancient Roman world. Those that have tackled the subject in any depth are largely out of date: see Lesky (1954); Esser (1961). There are brief articles on the *lusci* (one-eyed men) of Roman legend and literature: see Africa (1970) 528–538; Moeller (1975) 402–410; and Watson (1982) 71–76. Longer chapters on eye diseases and their treatments: see esp. Jackson (1996) 2228–2251. Some recent engagement with disability studies that includes discussions on the blind: see Vlahogiannis (1998) esp. pp. 18–20 and Laes (2008) esp. pp. 103–105. However, nothing comes close in scope and approach to Rose's (2003) study. Readers should note that at the time of publication, the research project of Dorien Meulenijzer (Vrije Universiteit Brussel) recognised these same concerns. This project is sure to be a valuable source on the topic. For further information, see: http://www.dorienmeulenijzer.eu/about_me/about_me.htm.

is most abundant and offers wider possibilities for interpretation. Having said that, mention will be made, where appropriate, to other relevant sources of evidence that can be used to further nuance our understanding of the written record and of visual impairment more generally. The literary sources to be considered range widely in genre and chronology, from medical texts to imperial biographies, dating primarily between the second century BCE and the second century CE. Readers will note that early Christian sources within this period have been deliberately excluded, despite the numerous stories recounting the miraculous healing of blindness (especially through the sacrament of baptism) in the lives of the saints.[10] This is to avoid overlap with Cornelia Horn's chapter in this volume.

Admittedly, the sources under examination are somewhat problematic; as such, I offer the following apologia. Although I hope to give readers some idea of the scope of (literary) evidence relating to visual impairment, I regret that oversights are inevitable, especially given that what follows is the first attempt to tackle a corpus that has yet to be systematically collected and analysed.[11] The nature of the literary sources and their range in both genre and chronology means that we must paint in very broad strokes and contextualise this material within the wider cultural and social milieu. Also, these sources tell us more about the perception of visual impairment by the elite, sighted and able-bodied, than they do about the average, visually impaired, disabled of Roman society. No first-hand account from a blind Roman survives; we cannot, therefore, begin to comprehend the subjective experience of a person living with visual impairment. This makes secondary evidence supremely important. It also creates an inevitable distance between reality and representation. Nevertheless, the representation of blind individuals in the literature can be particularly revealing as it surely reflects, to a certain degree, the attitudes, beliefs and ideas about blind people in everyday life. Moreover, the parallels that occur in texts of such variety can underline common reactions to loss of eyesight and interactions with the visually impaired. As ever, however, we proceed with caution and critical judgement.

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[10] For example, St. Paul of Tarsus who was blinded and then healed after being baptised (Acts 9:1–19). See also the numerous stories in which Jesus heals blind men, e.g. Mark 8:22–26, Luke 18:35–43, John 9:1–12.

[11] See p. 5 of the Introduction to this volume on the Herculean task of accessing and collecting all known instances of people who were blind, speech-impaired, hindered in their mobility, etc. in the ancient world. I do not pretend to have gathered in this chapter every reference to blindness or loss of eyesight in Latin literature, but I do aim to make good use of those referenced herein.

1.2. *Terminology*

In the modern Western world, the terms "partially sighted", "low vision", "legally blind" and "totally blind" are commonly used to denote degrees of sight and blindness. The terminology and correlative set of criteria are well defined by the World Health Organisation under the disability category of "visual impairment".[12] In ancient Rome, however, no categorical definitions of disability existed. Indeed, the parameters of blindness and degrees of sight were perceived very differently in the ancient Roman world and the criteria for what constituted blindness and visual impairment were much more elastic, as the vocabulary suggests.

In Latin, a wide range of terms is used to denote varying degrees of sight.[13] For complete loss of vision, the terms *caecitas*, *caecitudo* (blindness), *caeco* (to make blind) and *caecus* (to be blind) are frequently used.[14] Partial loss of vision (as opposed to "totally blind") seems to be more commonly referenced in the sources. *Luscus* or *luscinius* can mean either having one eyeball missing or blind in one eye—in any case, the result is the same, partial sight. One-eyed men, both home-grown and barbarian, were figures of military legend in ancient Rome—Horatius Cocles, Hannibal, Sertorius, Julius Civilis, etc.—probably because individuals with eye injuries would have been a common sight in Italy on account of the dangers of warfare, as shall be discussed below. A single eye is also referenced as *monoculus* or *unoculus*, as in Plautus' *Curculio* (392–393) where a slave sporting a fake eye-patch is greeted (*unocule, salve*) with the teasing remark that he is of Cyclopean lineage (*de Coclitium prosapia*). Additional eyes (three-eyed) are also noted, though less frequently, and this seems to have been more bizarre and noteworthy. Plutarch tells us that in the monster markets (τῶν τεράτων ἀγορὰν) of Rome, persons who "have no calves, or who are weasel-armed or who have three eyes (τριοφθάλμους) or who are ostrich-headed," could be purchased.[15]

There is also a slew of (medical and lay) terms to denote poor vision more generally, such as *caecutire* (to see badly), or *caligare* (to be dim-sighted). Descriptors coupled with *oculus* (eye, eyesight), such as *oculis hebetioribus* or

12 For details the WHO website can be seen on http://who.int/topics/blindness/en/.

13 For an extensive list of the Latin (and Greek) terminology, see the section on "vocabulary" in Meulenijzer's website (above footnote 9).

14 There is also deliberate blurring in the terminology—*caeco* and *caecus* can also mean to make dark and to be devoid of light. For blindness in a "culture of light" as referenced in the Greek world, see Bernidaki-Aldous (1990) with relevant bibliography.

15 Plutarch, *De curiositate* 520c.

male oculatus, and with *videre* (to see), such as *minus vidit*, are also employed to denote poor eyesight, though we cannot determine the extent of vision loss.[16] We also cannot know how other terms relating to conditions of the eyes would have affected vision, such as *ocellatus* (little-eyed), *paetus* (blink-eyed) or *lippinus* (blear-eyed), though presumably these were considered mild defects. Indeed, these terms appear in the long list of Roman cognomina which denote specific visual impairments, including: Caecilius (blind), Cocles or Luscinus (one-eyed), Ocella or Ocellina (small-eyed), Strabo (cross-eyed), Paetus (blink-eyed), etc. The number of cognomina that reference eye defects suggests that mild forms of visual impairment were relatively common in the Roman Republic and individuals identified in this way bore such names without (much) stigmatisation.[17]

Though the Romans were far from inventing categories or definitions of disability, a classification of physical conditions certainly existed, including a wide range of terms highlighting difference such as blindness and degrees of sight. In many cases, these terms only take on specific meaning in the individual contexts in which they are used. The terminology itself thus becomes secondary to context, which is highly informative of attitudes towards the visually impaired and their treatment in society. As we shall see below, a blind man could be ridiculed because of his physical impairment or venerated because of his "insight"; a man with partial eyesight could be castigated or made a hero; more commonly, however, blind and partially sighted (wo)men were unremarkable and their stories, when they survive, are far less sensational. The possibility that one could lose his/her sight was a simple fact of life in the ancient world, and most visually impaired people were, to reiterate the conclusion of Rose, "far from exceptional".[18]

2. The Causes of Visual Impairment in Ancient Rome

This section sets out to examine the reported causes of visual impairment in ancient Rome resulting from disease, injury (either accidental or intentional) and old age. It tries not to repeat information that has been carefully treated

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16 See Suetonius, *Nero* 51, 1; Suetonius, *De Rhetoribus* 5; and Suetonius, *Augustus*, 79 respectively.

17 Approximately 40 percent of the names extant from the Roman Republic describe corporal abnormalities. On their pejorative use, see Corbeill (2010) esp. 443–444. Others have suggested these were originally playful nicknames that an individual willingly adopted, see Kajanto (1965) 20. See also the discussion below on Appius Claudius Caecus.

18 Rose (2003) 79.

elsewhere; rather, it aims to bring together the different sources in order to evaluate how the stories in these sources feed into a well-established discourse on vision and its importance in the Roman world. Comparative data will be drawn from the modern world as well as, in some instances, from the ancient Greek world, to highlight understandings (both ancient and modern) of vision and visual impairment.

2.1. *Disease*

According to the World Health Organisation, 285 million people worldwide are visually impaired, 39 million of whom are blind. 90 per cent of those affected live in developing countries, where communicable eye diseases are still the chief cause of blindness.[19] In ancient Rome, disease was likewise responsible for most vision loss and blindness.

R.P.J. Jackson's 1996 article on *Eye Medicine in the Roman Empire* is an excellent resource for our understanding of ancient ophthalmology. Jackson notes that a disproportionately large part of (Graeco-)Roman medical literature concerns eye diseases. Indeed, in his *De Medicina*, Aulus Cornelius Celsus devotes an extensive chapter to the subject, providing insight into the causes and treatments for common eye defects, ailments and infections.[20] The medical knowledge of Celsus, along with that of numerous (Greek) physicians and practitioners, demonstrates a good understanding of the anatomy of the eye and the conditions that could lead to blindness and visual impairment.[21]

The most frequently mentioned optic disorders were *lippitudo* and *aspritudo*, used to describe a range of eye diseases and infections characterised

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[19] Developed countries are also affected by eye disease. In 2011, the National Coalition for Vision Health published a report on "Vision Loss in Canada" based on the findings of a research project conducted in 2009. It noted that Canada faces a crisis in eye health care and revealed alarming statistics about vision loss. Of the four major eye diseases leading to vision loss, more than 2.5 million Canadians currently have cataracts; at least 250,000 Canadians are affected with glaucoma, with approximately 10,000 blind as a result; nearly 1 million Canadians have age-related macular degeneration, 64,000 of whom are blind; and nearly 500,000 Canadians have some form of diabetic retinopathy with more than 6,000 blind as a result. See the report on "Vision Loss in Canada" www.eyesight.ca/activities/NCVH/VisionLossinCanada_e.pdf and the website of the National Coalition for Vision Health seen on www.visionhealth.ca.

[20] *De medicina* 6, 6 deals exclusively with eye diseases. Celsus notes in his introductory remarks: "… there are grave and varied mishaps to which our eyes are exposed; and as these have so large a part both in the service and in the amenity of life, they are to be looked after with the greatest care".

[21] Including Aelius Galen, Pedanius Dioscorides (*De Materia Medica*) and Paul of Aegina (*De Re Medica*).

by inflammation and running of the eyes.[22] An "eye specialist", *opthalmicus* or *medicus ocularius*, treated various eye conditions using a wide range of dietary measures, baths, fomentations, purging and clystering, often in combination with the administration of drugs.[23] Celsus outlines a long list of drugs (see esp. 6, 6, 3–8b) that could be blended in novel mixtures by the *auctores* of eye salves for a wide range of treatments. Archaeological evidence confirms the use of such treatments. Collyrium stamps were used to mark eye medicines, inscribed with the name of the doctor, the ointment, and the ailment for which it was intended.[24] Over three hundred collyrium stamps have been discovered, at least 25 percent of which refer to treatments for *lippitudo* and 20 percent for *aspritudo*.[25] The archaeological evidence seems to confirm the belief in Celsus' (6, 6, 39) closing remark that most of the eye disorders he had described could be healed "by simple and readily procured remedies". Indeed, without proper treatment, many Romans would have suffered the debilitating effects of what could be easily treated eye conditions.[26]

For infections and diseases of a more serious nature, specialised treatments were also available, including surgery. Celsus describes several conditions which commonly led to blindness if not medically treated, including proptosis (6, 6, 8g–9c), phthiriasis (6, 6, 15) and mydriasis (6, 6, 37). The major cause of blindness was probably cataracts, which are also discussed by Celsus (6, 6, 35), along with surgical treatment (7, 7, 14). This was perhaps the most delicate and dangerous of eye operations in antiquity, since it involved penetration of the interior of the eye. Celsus was aware of the risks of this surgical procedure and repeatedly stresses these in describing the operation

[22] Celsus described *lippitudo* as an inflammation, sometimes chronic, consequent on, or contributing to trachoma. However, he also used the word to translate the Greek *ophthalmia*, while he used *aspritudo* for the Greek *trachoma* and *ophthalmia*. See Jackson (1996) 2229. Galen, (12, 766–777 Kühn) lists over 124 different eye pathologies. Although specific eye diseases can seldom be equated unequivocally with a modern disease, it is nevertheless possible to recognise in Galen's medical descriptions many of the symptoms of diseases and infections which still occur today.

[23] Celsus (6, 6, 17; 6, 6, 27b; 6, 6, 34b; 6, 6, 38) advises a range of bathing practices for minor eye complaints; Pliny the Younger (*Epistulae* 7, 21, 2) states that he used the baths to help cure an eye problem. Other remedies outlined by Celsus (6, 6, 8b) include the use of woman's milk for severely inflamed eyes; and (6, 6, 39) the blood of a pigeon, dove or swallow for eyes bloody from a blow.

[24] For collyrium stamps see Jackson (1996) 2239–2243; Voinot (1999).

[25] Jackson (1996) 2229: "This is despite the fact that some twenty-five more eye ailments are mentioned on the stamps." See also Boon (1983) on collyrium stamps and eye-troubles.

[26] However, as Watson (1982) 75 notes, it is likely that a significant number of persons, especially among the common people, lost their sight due to their reluctance to seek or inability to obtain medical treatments.

(7, 7, 6b; 7, 7, 9b).[27] The risks of surgery more generally seem to have been widely circulated. Other, non-medical, sources inform us that accidental eye loss could result from botched surgery by incompetent or careless doctors. Four epigrams in the *Anthologia Graeca*, including two by Nicarchus (9, 112 and 115; the others are 9, 117 and 126), satirise eye-doctors who blind their patients, and a poem of Martial (*Epigrams* 8, 74) plays on the theme of an eye doctor (*opthalmicus*) turned gladiator (*oplomachus*) who continues to harm the eyes of his victims.[28] These humorous references, combined with the cautionary approach of the medical writers, suggests that accidents during eye surgery were not infrequent.

In some (rare) cases, spontaneous cures seem also to have been an important element in healing. Pliny the Elder observes that humans could be cured of blindness by the emission of fluid from their eyes; he cites cases of "many persons" being cured like this after having been blind for twenty years.[29] Celsus (7, pr. 2) too remarks that eyes after having long been treated by doctors, sometimes get well without them. The belief in miraculous cures surely accounts for the longstanding tradition of ex-voto dedications. Anatomical votives in the shape of eyes, ears and feet probably reflect the prevalence of the most common physical disabilities: blindness, deafness and lameness, respectively. Dedicating representations of body parts at a temple or sanctuary has long been identified as an appeal or token of thanks to the gods for a cure (whether healing-specific, i.e. to Asklepios, or not).[30] The preponderance of eye votives and their moulds in village temples across Roman Egypt indicates that eye problems were a common affliction; indeed, papyrological records also attest many cases of visual impairment.[31] Noteworthy too is a curious story about the Emperor Vespasian who is

27 Galen's recorded surgical treatment of cataracts in *De methodo medendi* 14, 13 (10, 990 Kühn) is similarly cautionary.

28 *Oplomachus nunc es, fueras opthalmicus ante. / fecisti medicus quod facis oplomachus*

29 Pliny the Elder, *Naturalis Historia* 11, 149.

30 Though significant research has been conducted on the relationship between anatomical votives, healing sanctuaries and religious practices (see Turfa, 1994 and De Cazanove, 2000) little has been done to examine these votives within the wider context of disability history. A conference held in June 2012 entitled "Re-defining Approaches to the Anatomical Votive" at the British School in Rome brought together scholars across a range of disciplines to examine what these offerings reveal not only about past religious and medical contexts and practices, but also about identity, society, politics and constructions of the human body. There was little emphasis however on the topic of disability theory.

31 For example, *P. Oxy*. 12, 1446, 1 and *P. Rein*. 2, 113. For full discussion, see Marganne (1994); Rathbone (2006) 105–106.

reported to have healed a blind man at the Serapeum in Alexandria.[32] This evidence testifies to the concern over visual impairment and the different religious and medical cures sought throughout the vast lands of the Roman Empire from the late Republic onwards.[33]

2.2. *Injury*

2.2.1. *Accidental Injury*

Today, approximately 1.6 million people worldwide are blind from eye injuries sustained in activities related to labour, sport and the military. This figure is sobering given the fact that the majority of these eye injuries are preventable. Protective eyewear—safety glasses, goggles, face shields—exist for use according to the nature of the hazard to ensure eye safety. Without the same protective gear, we must imagine that a considerable portion of the population in ancient Rome would have suffered from accidental eye injury resulting in temporary or permanent loss of vision while engaged in labour or battle.

In labour, mining, quarrying, woodworking, smithing and glassblowing could be particularly dangerous professions where the possibility of flying material (be it metal, glass, stone or wood) could potentially damage the eyes. The quarrying of marble from Luna or travertine from Tibur for the construction of grandiose monuments would inevitably contribute to eye-related injuries. Blacksmiths were prone to inflamed eyes and other, more acute eye irritations from flying sparks and excessive exposure to the forge in the production of military equipment.[34] Likewise, glass-blowers continually exposed to the infrared and ultraviolet radiation of molten glass probably suffered from conjunctivitis, or, more seriously, cataracts.[35] Without protective eyewear, the ancient Romans were much more susceptible to both minor and major eye injury while at work.

Perhaps more common, however, would be eye injuries sustained by soldiers in battle. In a militaristic society, war was the duty of all Romans, and throughout the Republic it was a duty to which all eligible citizens were

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32 Suetonius, *Vespasianus* 7, 2–3. This story will be discussed in detail below, p. 103.

33 For further discussion on "curing" disability more generally, see Vlahogiannis (2005).

34 The inflamed (*lippus*) eyes of Demosthenes in Juvenal *Saturae* 10, 130 seem to be caused by the "soot of the glowing ore" (*ardentis massae fuligine*) at his father's sword factory. For the production of military equipment and smithing in antiquity, see Bishop, Coulston (1993) 183–195.

35 For the physical ramifications of glassblowing in antiquity, see Fischer (2006/2007) especially pp. 305–308 on the eyes.

enlisted on an annual basis. Injuries leading to physical disfigurement and disability must have been endemic; although there is no way of estimating how large a percentage of the soldier population became visually impaired, we can speculate that eye injuries would have been common given the fact that helmets lacked eye protectors, leaving the eyes particularly vulnerable to attack.[36] While it is the stories of great generals wounded in battle that are most well-known—Horatius Cocles, Hannibal and Sertorius each lost an eye in battle[37]—the sunken eye socket and/or eye-patch may have in fact been a familiar sight in Italy throughout the Republic and Empire. Plautus' Curculio sports a fake eye-patch, boasting that he sustained his wound while fighting *pro patria*.[38] Archaeological evidence in the form of a leather eye-patch from the fort at Vindolanda points to the case of its real-life use on the Roman frontier.[39]

Other sources give us further insight into the eye injuries suffered among the common rank and file. Julius Caesar notes that four centurions in a single cohort lost their eyes (*oculos amiserunt*) in the civil wars.[40] In these same wars, Suetonius notes that the centurion Cassius Scaeva was blinded in one eye (*excusso oculo*) at the battle of Dyrrachium. Lucan gives further details: he was struck by a spear to the eye.[41] Lucan also records a horrific

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36 Although helmet styles changed throughout the Republic and Empire, helmets were characterised by their conical or round shape with a broad, ribbed neck-guard, a brow-guard, and large hinged cheek-pieces. Some were also equipped with ear protectors. Presumably, eye protectors were never added as this would have restricted vision. For Roman military equipment, see Bishop, Coulston (1993) esp. pp. 60–62, 93–96, 117–119.

37 According to Dionysius of Halicarnassus (*Antiquitates Romanae* 5, 23, 2–25) Horatius Cocles lost his eye either during or prior to the battle against the Etruscans at the Pons Sublicius; Plutarch, *Poplicola* 16, 4–7 suggests that he lost the eye in battle or may merely have had a Cyclopean appearance since his nose was flat and his eyebrows met in the middle. According to Livy, *Ab Urbe Condita* 22, 2, 10 Hannibal's loss of sight in his right eye was the result of an eye infection left untreated. See also Polybius 3, 79, 12 and Nepos 23, 4, 3. According to Coelius Antipater (*Historicorum Romanorum Reliquiae* 1 frag. 34), Juno threatened to take the sight of the other eye if he plundered her temple at Lacinium—see Cicero, *De Divinatione* 1, 48. Plutarch, *Sertorius* 4, 2 notes that Sertorius lost his eye from a blow during the Marsic War. For a roster of one-eyed men in Roman myth, see Africa (1970). For one-eyed soldiers more generally, see the list in Esser (1934).

38 Plautus, *Curculio* 394: *Catapulta hoc ictum est mihi apud Sicyonem*.

39 See Birley (1992) 111–119, esp. 117, fig. 5. The author is engaged in analysis of other leather fragments found at Vindolanda in consultation with Dr. Elizabeth Greene at the University of Western Ontario, Canada.

40 Julius Caesar, *De Bello Civili* 3, 53, 4. The cause of their injury may have been due to the "thirty thousand arrows which had been thrown into the fort" where these centurions were stationed.

41 Suetonius, *Julius* 68, 4; Lucan, *Pharsalia* 6, 213–216.

description of the soldier Tyrrhenus whose eyes were dashed out (*procurrunt*) by a missile at the siege of Massilia.[42] Given that war veterans were likely to have sustained a vast number of disfiguring and disabling injuries, we might also inquire into their treatment and reintegration into society upon their return home. There is some evidence that war scars could have been seen as marks of honour, a visual testament to a soldier's *pietas* and *virtus* in Roman warfare (cf. Samama in this volume, pp. 245–246).[43] Sallust tells us that Sertorius took great pride in his eye wound, "for it showed how gloriously he had preserved the rest of his body".[44] Plautus' Curculio demands the respect accorded to a wounded war veteran, but because he is a slave, and faking his eye injury, he is ridiculed instead. Sources also suggest that war veterans were likely to have received state benefits. In his sixteenth satire, Juvenal protests against the privileges enjoyed by military men, including immunity in legal matters and financial rewards. Interestingly, a quip in lines 7–12 gives us an idea of the ill-adjusted veteran soldier; Juvenal mocks the wounded civilian who does not dare to seek redress against the soldier who has beaten him, leaving him with a single eye.[45] The implication of this joke is that such attacks extended beyond the battlefield. Indeed, there may be more substance behind this "joke"; additional evidence points to the fact that eye injuries sustained in personal encounters were fairly commonplace. If a soldier's eye wound could be seen as a mark of honour, what then do we make of eye injuries sustained in personal encounters (between soldiers, civilians, etc.)?

2.2.2. *Intentional Injury*

H.C. Nutting's 1922 article on *Oculos Effodere* is an excellent study of deliberate attacks leading to eye injury, specifically through the gouging out of the eyes. Nutting notes the Roman tendency in personal encounters to attack the eyes, often with the full intention to tear the eyeball from the socket. Allusions to gouging out the eyes are particularly frequent in the comedies of Plautus and the imperial biographies of Suetonius and the *Scriptores Historiae Augustae* (hereafter SHA), which provide information on the nature and implications of such attacks.

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[42] Lucan, *Pharsalia* 3, 709–721. Although Lucan is the most gruesome of Latin epicists, there is likely to be some truth in his exaggeration.

[43] See also Salazar (2000) on wounding as a literary topos and metaphor for heroism in ancient literature. On the flip side, war wounds could also have been seen as marks of punishment for a battle lost.

[44] Sallust, *Historiae* 1, 88.

[45] For a reading of this satire as evidence of typical attacks in daily life, see Isaac (2002) esp. 185–186.

Republican tradition suggests that the eye was a favourite point for attack in personal encounters. The comedies of Plautus provide multiple examples where slaves in particular are targets of their master's cruelty, and gouging out the eyes is a common threat, both real and implied.[46] In relationships where a hierarchy is established, master vs. slave, for example, such threats and their enactment might seem the natural order of things, but this is far too simple a conclusion; ocular gouging was an especially efficacious punishment. The brutality of the act is evidenced as part of the gruesomely violent death of Marcus Marius Gratidianus. Several sources describe the mutilation and dismemberment of Gratidianus' body, which included the gouging out of his eyes.[47] Lucan's account in the *Pharsalia* relays the most extensive list of tortures inflicted; it is particularly revealing for its emphasis on the placement of Gratidianus' ocular gouging in the sequence of tortures. "This man slices off the ears, another the nostrils of the hooked nose, that man popped the eyeballs from their sockets—he dug out the eyes last, after they bore witness for the other parts of the body."[48] The treatment of Gratidianus' corpse emphasises the destruction of his citizen's integrity; the stress on his eyes—left last so as to bear witness to the mutilation—emphasises the act of watching the violence as the body is rent asunder.[49] Indeed, Lucan underlines the fact that the Roman people were all witnesses. The viewer (and reader) is thus implicated in the violence; it is the power of the gaze that motivates one to harm the eye(s) of an individual.[50]

From reading Suetonius and the SHA, we might associate ocular gouging with the amoral and transgressive behaviour of the so-called "bad" Roman emperors. And indeed, this is partly the case. As I have argued elsewhere, part of the standing charge against the bad emperors was their incorrigible abuse of power to manufacture deformity, either as punishment or merely for their own idle amusement.[51] It is worth noting the link between the

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46 For example Plautus, *Aulularia* 53; *Trinummus* 463–465; *Persa* 797–797. See Nutting (1922) 314 for further examples and discussion.

47 Seneca *De Ira* 3, 18; Lucan, *Pharsalia* 2, 173–193; Sallust, *Historiae* 1, 44.

48 Lucan, *Pharsalia* 2, 183–185.

49 Hinard (1984) atomises the public atrocities done to the bodies of Baebius, Gratidianus, Sejanus and Cicero, stressing the emphasis that the ancient sources put on the watching of this violence. In the Byzantine Empire, mutilation was a common method of punishment. Blinding seems to have been a recognised penalty for treachery against the emperor. See esp. Lascaratos, Marketos (1992).

50 This extends to deliberately damaged images. In acts of *damnatio memoriae*, the most violent involve the removal of the face—and especially the eyes—on statues and coins. As art historian David Freedberg (1989) notes, take away the eyes, and you remove the signs of life.

51 See Trentin (2011) esp. 199–203.

bad emperors who are themselves deformed in some way, and who both manufacture deformity and surround themselves with deformed bodies. For example, both Nero and Domitian are reported to have had weak eyes and poor eyesight;[52] they are also the two emperors infamous for their ocular gougings. Nero seems to have learned his violent ways from his father who is said to have plucked out the eye (*oculum eruit*) of a Roman senator for being too outspoken and chiding him.[53] Nero is also accused of aiming a lampoon entitled "The One-Eyed Man" (*Luscio*) against a certain Clodius Pollio.[54] Domitian attempted to gouge out the eyes (*oculos effodere*) of Stephanus, Domitilla's steward, who had plotted to kill him.[55] Perhaps he need only have glared at him: Tacitus writes that the worst of the torments of Domitian was to see his eyes fixed upon you.[56] The power of Domitian's malevolent gaze may have been used to highlight the position of his blind informer (*caecus adulator*), Catullus Messalinus.[57] Other bad emperors were equally notorious. The emperor Commodus dubbed one-eyed (*luscinios*) those whom he had disfigured by plucking out one of their eyes (*singulos tulisset oculos*).[58] The emperor Elagabalus is said to have been in the habit of inviting eight one-eyed men (*octo luscos*) to his banquets as a source of entertainment, though we are not told if he had a hand in their disfigurement.[59] The actions of these emperors were used by Suetonius and the unknown author(s) of the SHA to highlight their "otherness" and to contribute to their schematisation as categorically "bad".[60]

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52 Suetonius, *Nero* 51, 1, *oculis caesis et hebetioribus*; Suetonius, *Domitianus* 18, 1 *grandibus oculis, verum acie hebetiore*.

53 Suetonius, *Nero* 5. We can suppose that Nero (Suetonius, *Nero* 26, 2) beat his enemies in the same way, that is by gouging out their eyes; this is made all the more plausible when we are told that "in the strife which resulted, he often ran the risk of losing his eyes (*oculorum … periculum*)".

54 Suetonius, *Domitianus* 1, 1. We know relatively little about Clodius Pollio other than that he was a man of praetorian rank. Presumably he was blind in one eye; possibly the result of an injury inflicted by Nero.

55 Suetonius, *Domitianus* 17, 2.

56 Tacitus, *Agricola* 45: … *praecipua sub Domitiano miseriarum pars erat videre et aspici* …

57 Juvenal, *Saturae* 4, 116. See also Pliny, *Epistulae* 4, 22, 5: *Incidit sermo de Catullo Messalino, qui luminibus orbatus ingenio saevo mala caecitatis addiderat* …

58 SHA, *Commodus* 10, 4. The same line also notes that Commodus dubbed one-footed (*monopodios*) those whom he had cut off one of their feet (*singulos pedes fregisset*).

59 SHA, *Heliogabalus* 29, 3. The eight one-eyed men were in good company; Elagabalus also invited eight bald men, eight men with gout, eight deaf men, eight dark men, eight tall men and eight fat men (*octo luscos etitem octo podagrosos, octo surdos, octo nigros, octo longos et octo pingues*).

60 See Trentin (2011) for further analysis of the relationship between the Roman emperors and their deformed slaves.

However, it was not just the bad emperors who are accused of ocular gouging. Suetonius recounts that when Octavian was triumvir he attempted to gouge out the eyes (*oculis … effossis*) of the praetor Quintus Gallius who allegedly made a treacherous attack on Octavian.[61] Though the incident is similar to that of Domitian's attack above—both are retaliating against would-be assassins and both use their bare hands as weapons—Augustus is not stigmatised in the same way. The incident occurs when he is Octavian and is used by Suetonius to contrast his benevolent character as Augustus. Another interesting story surrounds the emperor Hadrian, though it is not recounted in the SHA. Galen tells us that Hadrian, in a fit of anger, stabbed a slave in the eye with a stylus. Feeling remorse, Hadrian asked the slave to choose a gift as compensation. The slave responded that he only wished to have his eye back.[62] The slave's response clearly speaks to the premium placed on vision and visuality in ancient Rome. The message here is twofold; first, Hadrian, an otherwise good emperor, like Augustus, was not above such an action, though, to be sure, it was the result of a moment of rage; second, and more importantly perhaps, Hadrian feels remorse. Hadrian's remorse carries quite some weight here; it sets this incident (and him) apart from the bad emperors.

Notably, it is also the (good) emperor to whom the ability to restore vision is attributed. Two peculiar episodes relating to the emperors Vespasian and Hadrian reveals them as miraculous healers of blindness. According to Suetonius, while consulting the auspices in the Serapeum at Alexandria, two men, one blind (*luminibus orbatus*) and the other lame, came to Vespasian begging to be healed. Serapis had declared to the men in a dream that Vespasian would restore, to the one, his vision (*restituturum oculos*) by spitting on his eyes, and to the other strength in his leg, by touching the man with his heel. With some reluctance Vespasian acquiesced, and both men were healed.[63] In the SHA we are told that Hadrian, while suffering ill health, had resolved to commit suicide. At the time, a certain woman was told in a dream to urge Hadrian not to do so; she did not do this, and became blind as a result. After being urged a second time to relay the message, she went to Hadrian and, having washed her eyes with sacred water, recovered her eyesight (*oculos recepit*). We are also told that a blind old man (*vetus*

61 Suetonius, *Augustus* 27, 4.

62 Galen, *De proprii animi cuiuslibet affectuum dignotione et curatione* 4 (5, 17–18 Kühn).

63 Suetonius, *Vespasianus* 7, 2–3. The story is also recounted in Tacitus, *Historiae* 4, 81–82 and Dio Cassius 66, 8, 1–2. For a full discussion of the story and its contextualisation in Flavian Rome, see Luke (2010). Note the biblical similarities: Jesus spits on the eyes of the blind man and cures him; e.g. Mark 8, 22–26; John 9, 6–7.

caecus) from Pannonia visited Hadrian when he was ill with fever and, when touched by the emperor, his eyesight was restored and the fever left Hadrian.[64] Interestingly, Hadrian becomes the only emperor who could be both the cause and the cure of visual impairment. This evidence too testifies to the concern over visual impairment and its causes, both accidental and intentional, and gives some indication, perhaps, of the frequency of eye injury in ancient Rome.

2.3. *Old Age*

According to the World Health Organisation, 65 percent of all people today who are visually impaired are aged 50 and older. Age-related macular degeneration has become the primary cause of blindness in developed countries and the third leading cause worldwide. The aging global population, coupled with the mounting costs of vision care and a lack of preventative programs for eye health, mean that near-perfect vision is a decreasing phenomenon. The Romans did not have similar age-related eye health concerns, since, on average, life expectancy was much lower than it is today. However, literary evidence suggests that poor vision was a recognized 'symptom' of old age and a concern for the Romans, too.

It is estimated that at Rome the proportion of elderly as a percentage of the total population was likely to have been between 6–8 percent.[65] Numerous studies have recently explored the complex issue of old age in the Roman world, though few have thought specifically about the connection between aging and visual impairment.[66] De Libero's 2002 article on *Dem Schicksal trotzen. Behinderte Aristokraten in Rom* is a notable exception, in which the failing vision of some of Rome's elderly aristocrats is examined; see discussion below. Given the evidence already discussed, if a Roman survived to adulthood without suffering a debilitating eye infection, battle wound or vicious personal attack, it was very likely that s/he would suffer the eye aches and poor eyesight that were common symptoms of old age.

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64 SHA, *Hadrianus* 25. Both of these events are recorded by the author as having been faked by Marius Maximus (25, 6). None of the healing stories recounted by Pliny (above footnote 29), Suetonius and the SHA consider the (physical, mental and psychological) adjustments for the processing of new visual information.

65 Cokayne (2003) 3.

66 See, for example, Cokayne (2003); Parkin (2003); Harlow and Laurence (2002) and (2007). It is remarkable how little emphasis is placed on blindness in old age. Cokayne for example discusses the physical aspects of old age—wrinkles, grey hair and baldness—and the idea of old age as a disease, but does not engage with the topic of blindness or loss of eyesight beyond her brief mention of Celsus (p. 37) and Appius Claudius (p. 49).

Extant sources reveal a range of reactions to vision loss in old age.[67] On the one hand it is perceived as a horrifyingly traumatic experience evoking an extreme emotional response, and on the other hand, it is a seemingly trivial, mildly troublesome inconvenience, which lends itself particularly well to satirical ridicule. Gallus Cerrinius, an Augustan senator said to have suddenly gone blind (*captum repente oculis*), allegedly found it so upsetting that he resolved to commit suicide by starvation, only to be talked out of this by Augustus.[68] Augustus himself does not react to his own deteriorating eyesight; according to Suetonius Augustus was unable to see well in his left eye in his old age (*in senecta sinistro minus vidit*).[69] Although Augustus does not suffer total blindness, his poor vision is made a point of reference. It contrasts the physical description we are given prior: Augustus, an unusually handsome man, had clear, bright eyes (*oculos habuit claros ac nitidos*), which were thought to radiate a divine power (*divini vigoris*).[70] The power of Augustus' gaze is emphasised, but his deteriorating eyesight does not seem to have diminished his *auctoritas*, nor his other abilities. The same is true of other noteworthy (aristocratic) individuals. The most famous example is, of course, Appius Claudius Caecus, the man of Republican tradition who, blind in his old age, played a vital role in helping win the war against King Pyrrhus of Epirus in 279 BCE.[71] And the list (of less well-known Roman men) continues. C. Livius Drusus, a well respected Roman jurist, continued to give advice to the crowds of people who went to see him despite (if not because of) his old age and blindness.[72] The aged and blind praetor Gnaeus Aufidius was perfectly competent in all matters of government and wrote extensively on Greek history.[73] Likewise, the Stoic Diodotus, having gone blind in his

[67] Medical sources do not seem to be overly concerned with failing vision as a result of old age. Celsus lists eye aches, eyes that become dim (*caliga*), and a general deterioration of eyesight as very common symptoms of old age. For eyes dim from old age Celsus recommended (*De medicina* 6, 6, 34) smearing the eyes with honey and cyprus or olive oil and to walk and exercise a great deal as well as bathe frequently.

[68] Suetonius, *Augustus* 53, 3.

[69] Suetonius, *Augustus* 79, 2. He also notes that Augustus limped slightly at times in his old age (80).

[70] For comparison, see the eyes of Nero and Domitian, above footnotes 53 and 55.

[71] Livy, *Ab Urbe Condita* 9, 29 claims Appius Claudius Caecus was punished with blindness owing to the unforgiving anger of the gods. Ovid, *Fasti*, 6, 203–204 stresses that he was, as compensation, blessed with inner light.

[72] Cicero, *Tusculanae Disputationes* 5,112; Valerius Maximus, *Facta et dicta memorabilia* 8, 7, 4.

[73] Cicero, *Tusculanae Disputationes* 5,112.

later years, continued to teach on geometry and devoted himself even more strenuously to philosophy.[74] Both Cicero and Pliny the Younger complain of suffering from *lippitudo*, though they nevertheless go about their business as usual.[75] Certainly every individual was sure to react differently to different degrees of visual impairment, and sudden, total blindness was likely to have been a more difficult adjustment; but by and large, the sources suggest that, at least for the elderly elite, visual impairment did not interfere with an individual's private or, perhaps more importantly, his public affairs.[76]

For others, however, particularly those from the lower classes, visual impairment, especially in combination with old age, was often the source of ridicule and derision.[77] Sometimes this took the form of a light-hearted playfulness. Seneca, for example, tells the story of his wife's pet dwarf who had become blind in old age, but did not realise that she was blind. She continued to ask her attendant to change her quarters on account of the fact that her apartments were too dark.[78] Seneca's story feeds into a series of epigrams by Martial that mock the visually impaired, though these are often more crude and sometimes downright nasty. Martial seems to have been particularly fascinated with one-eyed (wo)men, and a few of his epigrams deride the physical appearance of at least two one-eyed hags, Laelia and Philaenis.[79] Martial seems here not to be deriding their disfigurement or disability exclusively, but rather their attempt to conceal the ravages of old age. Laelia is a prime example: she has already bought false teeth and a wig, but her missing eye is not so easily replaced![80] Nero's lampoon against "The One-Eyed Man" (*Luscio*) Clodius Pollio was probably equally as derisive and may have played on Clodius' age also.

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74 Cicero, *Tusculanae Disputationes* 5,113.

75 Cicero, *Epistulae ad Quintum fratrem* 2, 2, 1; Pliny, *Epistulae*, 7, 21.

76 For further discussion, see De Libero (2002) 75–93.

77 This capitalizes on a tradition in which deformed and disabled individuals are targeted as ideal subjects for ridicule and derision. See esp. the remarks of Cicero, *De oratore* 2, 239 and Quintilian, *Institutio oratoria* 6, 3, 7.

78 Seneca, *Epistulae* 50, 2. Another amusing story comes from the Aesopic fables (*Fabulae Graecae* 57, Perry) where an old woman is treated by a doctor for her bad eyesight; while the ointment is applied and her eyes are covered, the doctor steals all of her furniture. On removal of the ointment, the woman refuses to pay for her treatment because she is adamant that her sight had not been restored: after all, she could not see her furniture!

79 Watson (1982) 75, footnote 2: *Lusci* are mentioned in twelve epigrams. Those that focus on one-eyed (old) women include: 2, 33; 4, 65; 12, 22; 12, 23.

80 See Watson (1984) 72.

2.4. *Contextualising the Causes of Visual Impairment*

The ancient sources thus far discussed reveal an anxiety about the loss of vision that tie into discourses on the eye more generally. The sources emphasise the importance of the eyes in relationship to the body. Celsus (6, 6, 1) remarked in his introductory chapter on eye diseases that the eyes have a large part both in the service and in the amenities of life; they were thus to be looked after with the greatest of care. He also makes explicit reference to the fact that the eyes were exposed to many grave and varied mishaps; an allusion to the frequent eye injuries men sustained in labour, battle and/or personal encounters. Other sources confirm the frequency of eye injury, clearly highlighting that the eyes were a favourite point of attack. This surely reflected the widespread belief that the eyes revealed the very essence of a man's being.[81] Philosophers extolled the expressive nature of the eyes, which communicated by a language full of emotion. Physiognomic treatises stressed the importance of the eyes, devoting extensive discussions to their shape, colour, moistness, and shine, all of which illuminated character.[82] Beyond this, there is also an unusual wealth of expressions attesting to the esteem in which eyesight was held. *Oculus* and *ocellus* became terms of endearment and the oath "*per oculos iurare*" is frequently employed in amatory poetry.[83] In this context, it should come as no surprise that there is equally considerable reference to visual impairment in the ancient sources. To lose one's eye(s) and eyesight, whether partially or completely, by disease, injury or old age, had significant ramifications on the way in which an individual was viewed by members of the community, and also of course in the way in which s/he viewed the community. However, contrary to modern opinion, this condition was not always, or even commonly, viewed with disdain.

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[81] See Cicero, *De Legibus* 1, 9, 27; Quintilian, *Institutio Oratoria* 2, 3, 75; Pliny the Elder, *Naturalis Historia* 11, 145. McCartney's brief 1952 article on *Speaking Eyes*, outlines the use of facial expressions and gestures for communication.

[82] Marcus Antonius Polemon, of Laodicea-Lycias was a prominent second century AD sophist who wrote extensively on physiognomy. His work is known from Latin and Arabic translations and a later Greek paraphrase. Interestingly, one-third of his physiognomic treatise is devoted to the subject of the eyes. For the importance of the eyes in physiognomic texts, and antiquity more generally, see Rizini (1998).

[83] Ovid, *Amores* 2, 16, 44; 3, 3, 10; 3, 11, 48; Propertius, *Elegiae* 1, 15, 33; Tibullus, *Elegiae* 4, 5, 8.

3. The Implications of Visual Impairment in Ancient Rome

The evidence outlined on the causes of blindness and visual impairment has served to highlight the fact that loss of eyesight was a real concern in the ancient Roman world. Between disease, injury, and old age, we can infer that visual impairment was a relatively common disability. Though we cannot form any conclusions about the demography of visual impairment at any given time in ancient Rome, we can broaden our scope and contextualise the information that we do have to think about the implications of being visually impaired. This section will therefore consider, very broadly and very briefly, what life may have been like for visually impaired Romans, noting, as at the outset of this paper, that the extant sources tell us more about the perception of visual impairment by the elite, sighted and able-bodied, than they do about the average, visually impaired, dis-abled of Roman society.

3.1. *Integration, Not Isolation*

Rose notes: "In the ancient world, sighted people knew blind and sight-impaired people well enough to understand the abilities and limitations of failing vision and … there was not the cultural gulf between the sighted and the blind that exists today."[84] Given the evidence outlined above, this seems to ring true in the ancient Roman world; blind and visually impaired (wo)men were visible and vital members of Roman society. As we have seen, blindness and failing vision could affect anyone, at any age. Disease and injury could give rise to disability in an otherwise "healthy" individual. As such, visual impairment did not have the same (negative) connotations as other physical (and most often congenital) deformities like dwarfism, spinal curvature or intersexuality.[85]

Visual impairment alone did not bar an individual from entry to positions of government or religion. In fact, given the age requirements for members of the *cursus honorum* (especially the Senate) and religious offices, any number of these men may have had some form of visual impairment. It is unlikely that anyone would have asked Augustus to step down as Emperor or Pontifex Maximus because he was blind in his left eye. Of course, the emperor is an exceptional case; nevertheless, many prominent Romans also held reputable positions in society despite a visual impairment, such as the

[84] Rose (2003) 93.
[85] See Garland (2010) for discussion on dwarfism, spinal curvature and intersexuality.

lawyer L. Livius Drusus, or the teacher and philosopher Diodotus the Stoic, mentioned above. Likewise, there does not seem to have been an issue with the elderly, blind Vestal Virgin of the late Republic noted by Dio Cassius.[86] Admittedly, these positions were dominated by an elite class of citizens who were wealthy enough to live in relative comfort despite their impairment. Visually impaired individuals of the lower classes may have had fewer options available; they are likely to have found employment as poets, musicians, or entertainers more generally.[87] Individuals with prominent ocular deformities (cyclopean malformation or synophthalmia) may have became household pets, given the Roman penchant for owning slaves with unusual physical features and obvious physical deformities, as recounted by Plutarch above.[88] Finally, it is also probable that a number of blind individuals would have faced unemployment and financial hardship, seeking charity by begging. Indeed, stories of blind beggars abound from Greek times right through to the Byzantine Empire and beyond.[89]

A wide range of opportunities existed within Roman society for the visually impaired. Generally, partial vision loss had relatively little impact on one's ability to perform in most occupations; though without doubt, individuals who were totally blind may have been more restricted, depending on their status and wealth. It is erroneous, however, to make sweeping conclusions that the visually impaired were banned a priori from fulfilling common public roles as lawyers, teachers, entertainers, and so forth. The visually impaired were more active than has been traditionally recognised, this can

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86 Dio Cassius 54, 24. Mention of the Vestal Virgin comes via a story about a fire in the Basilica Pauli in 14 BCE which spread to the Temple of Vesta. All the sacred objects were rescued by the Vestal Virgins—only the eldest priestess did not help because she was blind. A related story surrounds L. Caecilius Metellus. Dionysius of Halicarnassus (*Antiquitates Romanae* 2, 21, 3) and Seneca (*Controversiae* 10, 4, 2) report that Metellus was punished by the gods for violating the taboo forbidding men to enter the temple of Vesta; he lost his sight after saving the Palladium when the temple of Vesta caught fire in 241 BCE.

87 The comment of a certain Callistratius to Dio Chrysostom is here revealing: "All these poets are blind and people do not think it possible for anyone to become a poet otherwise." To which Dio replies, "Their poets have contracted blindness from Homer, as though from ophthalmia" Dio Chrysostom, *Orationes* 36, 10–11.

88 For the display of the deformed body in ancient Rome, see Trentin (2011) esp. 197–199; 203–207.

89 John Chrysostom, *I Corinth* 21, 5 claims that children were deliberately blinded by their impoverished parents so as to make beggars of them. Even later in date, though generally agreed to be an entirely apocryphal story, the Emperor Justinian is said to have ordered Flavius Belisarius' eyes gouged out and reduced him to the status of a beggar near the Pincian gate of Rome. The story was popularized by Earl Philip Stanhope's 1829 *Life of Besilarius*; the only exhaustive biography of the general.

be attributed to the accommodations they received within their family and community network, areas that have not been amply explored.

3.2. *Accommodation, Not Alienation*

Modern society is equipped with a wide range of accommodations for individuals with visual impairments: service animals (guide dogs), travelling aids (canes), accessible pedestrian signs (audible signals), tactile communication (Braille), and so on, all of which aim to enhance accessibility. Though the Romans were certainly not a "disability-friendly" society with similar formalized accommodations, our sources do suggest that some assistance was available to help alleviate the difficulties of failing vision and total blindness.

Cicero, in his *Tusculanae Disputationes*, speaks about living a life of happiness, with specific reference to the blind man.[90] Cicero notes that one could live, very well and very able, without vision, so long as one had the faculty of an otherwise sound body and mind. Cicero refers to one specific type of man, the learned and wise (i.e. the wealthy, elite) man. Nevertheless, Cicero's comments provide useful information with which to think about the conditions that may have existed for the ordinary Roman. Providing a short list of illustrious blind men of history and contemporary society, Cicero highlights a number of important issues about the self-sufficiency and "ability" of the blind. In the picture he paints, dependency is the central tenet. Despite the fact that blind men seem perfectly capable of "thinking" for themselves, they are nevertheless dependent on others for the ins and outs of daily life. His good friend Diodotus the Stoic, we are told, is directly reliant on slaves to read to him, and presumably reliant to an extent on Cicero with whom he lives. Likewise, we are told that Asclepiades, a philosopher from Etruria, must suffer the inconvenience of having to rely on his servant. A similar, if not worse, predicament faced the lower classes, where a lack of wealth would have denied them recourse to slaves. At the same time, however, the family and community at large would have provided a system of support whereby members of the lower classes could go about their daily business, albeit with some difficulty and physical vulnerability.

In the ancient world, there was a strong network of interdependence that extended beyond the family to the wider community. Though one might argue that blindness and visual impairment significantly restricted one's movement within, or control over, his/her environment, this was not

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[90] Cicero, *Tusculanae Disputationes* 5, 110–115.

necessarily an insurmountable obstacle to one's freedom. As Rose and Laes have argued, rightly I think, within one's home environment, with familiar landmarks and a varying topography, an individual would have been able to move about with relative ease.[91] The visually impaired would have made use of walking sticks to further help navigate, and if necessary, guides could also be called upon.[92] Children were often responsible for the welfare of their parents, and we might extend this responsibility to good friends as well. Slaves were certainly also of service, and must have borne the brunt of the duties of care. Diodotus's slave effectively become his new eyes, reading aloud, presumably writing for him and guiding him about town. The evidence for the use of dogs as guides is more problematic, however. No evidence has been found to support the use of guide dogs in the ancient Greek world, and the assumption that this changed in the ancient Roman world is based on a faulty reading of an epigram in Martial.[93] Finally, in an interesting comment Ovid notes that people often gave way to the blind when crossing the street, as a courtesy.[94] Though Martial's epigrams mocked the one-eyed (wo)men of Rome, and without doubt the visually impaired were sometimes the objects of ridicule and derision, it is also the case that they were treated with common respect and civility, less a spectacle and more an ordinary sight.

In conclusion, I hope to have demonstrated that the topic of blindness and visual impairment in ancient Rome demands further scholarly attention. The range of issues, perhaps too briefly cited here, offer rich ground to explore the perception and reception of disability in the ancient world. Though this analysis has attempted to draw out a whole series of issues and questions, it acknowledges that the conclusions have been incomplete at times, and dominated, in large part, by the experiences of the elite Roman citizen. Such is the nature of the extant evidence. While visual impairment was likely to have been more manageable and less of a hardship for the wealthy, for individuals in the lower classes complete blindness would have been a much more severe impairment, but perhaps not as debilitating as we might expect or ascribe today. Only through the continued use of disability studies in collaboration with ancient history can a more nuanced understanding of life in the ancient Roman world for the blind and visually impaired be reached.

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91 Rose (2003) 88; Laes (2008) 104.

92 *Anthologia Graeca* 9, 298; Seneca, *Controversiae* 10, 4, 2.

93 Martial, *Epigrammata* 14, 81. For ancient Greece, see Rose (2003) 90. For ancient Rome, see Laes (2008) 104, footnote 85. Cf. Esser (1959) and De Libero (2002) 86 on the absence of such dogs.

94 Ovid, *Tristia* 5, 6, 31.

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A NEXUS OF DISABILITY IN ANCIENT GREEK MIRACLE STORIES: A COMPARISON OF ACCOUNTS OF BLINDNESS FROM THE ASKLEPIEION IN EPIDAUROS AND THE SHRINE OF THECLA IN SELEUCIA

Cornelia B. Horn

1. Perceptions of Disabilities in Late Antiquity

The present article cannot fill in the scholarly lacuna of investigating how the healing of ancient children, women, and men should be situated within the larger matrix of ancient pre-Christian or Christian thought on salvation, either temporarily from an imminent danger, or permanently, with guaranteed eternal bliss in heaven. Limitations that hinder fully accomplishing such studies include the limits of scholarly exploration of soteriology in ancient Christianity. This continues to be a field of inquiry with great potential for growth, but has not yet been explored and defined to the same extent as have Christology and Trinitarian thought. In the realm of classical Greek and Roman literature, scholars took up the project of studying disabilities among these ancient populations over two decades ago, with some success (see introduction p. 3–5). The study of disability in ancient Christianity, with the exception of texts that pertain to the Biblical canon, moreover, is a field of inquiry in its infancy. Within the limited context of scholars publishing in English, only a small amount of scholarly material that falls within the chronological parameters here can be identified.[1] Work in other European languages offers some additional perspectives.[2] All such studies certainly deserve further attention and expansion.

To the extent that the present study embarks upon a new voyage, it seems advisable to design a comparative project to build upon and integrate the study of disability in the ancient classical realm with the Christian material

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[1] Kelley (2009); Horn (2011). Laes (2011) strives to be comprehensive and includes classical and ancient Christian evidence.

[2] See for instance Wilpert, Zenker (1950); Esser (1961); Lumpe (1991); Centre de recherche sur les aspects culturels de la vision, Bruxelles (1992) and (1993); Yche Fontanel (1999).

of late antiquity. The current project offers at least a nod in the direction of developing an approach to working through the late ancient Christian material systematically. The present investigation is limited to one specific text, examined with the goal of capturing from the information contained therein one particular disability and its related phenomena, namely that of blindness and chronic visual impairments. In both the classical Greek and the ancient Christian material examined here, a clear nexus emerges between degrees of visual ability and personal belief in the efficacy of divine agents. Following an introduction to the texts under investigation with a critical view towards their wider perspectives regarding accounts of healing and how they have been employed in scholarship on disability, this chapter will narrow the perspective to the relationship between cases of healing blindness and sight impairment and expressions of personal religion. The bulk of this chapter examines material concerning blindness from the testimony at Epidauros and from the shrine of Thecla. The discussion and conclusions place the information derived from these two sites into the wider perspective of medical anthropology and the relationships between healing, faith, and religion.

Because the field of medical anthropology guides this study, the definition of disability rests on a nexus of ancient participants, not on the experience of any given individual. The ancient texts did not identify those who received assistance at either of the shrines, the Asklepieion at Epidauros or the shrine of Saint Thecla at Meriamlik near Seleucia, as 'disabled.' In fact, for such a term, as other scholars have noted, no ancient equivalent existed.[3] The texts from both healing sites used the vocabulary of sickness and health, but it is important to note that the criteria that distinctively characterized conditions that modern people might be inclined to label as 'disability' did not consist of degrees of sickness or health, but of assumptions about the curability, or incurability, of the condition. The corpus of material gathered for this study deals with understanding the convictions held by visitors to such shrines, and with understanding how and by whom the condition in question, whether illness or disability, could be affected. Here, it is important to consider the means accessible to medical practitioners and their assistants and to the visitors to the shrine.

3 Rose (2003) 11.

2. Textual and Literary Witnesses to Healing Miracles at the Asklepieion at Epidauros and the Shrine of Thecla in Seleucia

The single most voluminous and substantial textual witness to healing activities at a shrine preserved from the non-Christian ancient Mediterranean world is to be found at the Asklepieion at Epidauros. Several stelae, dating from the second half of the fourth century BCE, have inscriptions of sufficient length to warrant a narrative quality. While the historian Pausanias records having seen six of these narrative stelae in the second century CE,[4] at present only four have been recovered archaeologically. The healing narratives that constitute the content of the approximately seventy inscriptions that can be read, in whole or fragmentarily, include cases relating to chronic illness, deformity, and what many persons in the twenty-first century would call disability. Earlier studies of healing activities at the Asklepieion at Epidauros rely on the two volumes of translation and commentary presented in Edelstein and Edelstein (1945). In the meantime, however, textual criticism on the healing inscriptions on the four stelae has made progress. Thus the present study takes as it basis the more recent publication by L. LiDonnici, *The Epidaurian Miracle Inscriptions*, published in 1995.[5]

The relevant subset consists of ten cases each of blindness or wounds in or near the eye, and of paralysis and lameness, including epilepsy.[6] The ten cases of paralysis or lameness that are featured in the text pertain to adults, all of whom were male. No instances of deafness appear in the text. Muteness is represented in three instances, two of which are preserved only fragmentarily. Of the two cases of muteness, for which the general age group of the one seeking help at the shrine can be determined, one is a girl (C1 [44]), the other, a boy (A5).[7] Blindness is recorded for one boy, and one blind woman, Ambrosia of Athens, is mentioned. The remaining instances of blindness refer to adult males.

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4 Pausanias, *Periegesis* 2, 27, 1–3.

5 Edelstein and Edelstein (1945); LiDonnici (1995).

6 Garland (2010) 136–137, who offered quantitative comments on cases of disabilities represented on these stelae, based his comments on a dataset derived from reading Edelstein, Edelstein (1945) 221–237 (II.1, number 432). Discrepancies between his identifications of illnesses and the ones featured in the present study result from the differences in critical editions of texts used for the respective analyses.

7 LiDonnici (1995) 88, line 41, and 116, line 1.

The evidence for disabilities found in the Epidaurian healing inscriptions has received little attention in scholarly literature.[8] Bernhard Kötting's study of pilgrimage in the ancient pagan and Christian world simply subsumed cases of disability among any kind of illness or injury that was mentioned in those sources.[9] Admittedly, his monograph did not investigate specifically the cases of sick people who went on pilgrimage in search of healing. Felix Just's doctoral thesis, which culminated in an exegesis of John 9, discussed the value of the Epidaurian stelae for discerning the language of blindness,[10] but his analysis was incomplete for the purposes considered here.

Robert Garland, in his study *The Eye of the Beholder*, touched on the records of healing rituals from Epidauros, and concluded that the presence of disabilities was not the most representative element of the healing that occurred at Epidauros, but rather part of the more spectacular cases that were treated at the site. Garland argued against the interpretation of healing sanctuaries as specialised sites for treating disabilities. Following Eugen Bleuler,[11] who interpreted the Asklepiadic illnesses as symptoms of hysteria, Garland thought that the Epidaurian testimonies of healing should be understood as remedies for psychosomatic illnesses. From Garland's perspective, what appeared to be the long-term healing of any given disability was merely a temporary relief of symptoms that had been imaginary all along, either through prompting the suppliant by auto-suggestion or through occasioning an encounter with "a charismatic individual." After a while, the effect of these "healings" would wear off, not changing "the underlying pathological condition."[12]

One might take issue with Garland's analysis for its brief dismissal of the Epidaurian cures. The ancient healing sanctuaries were indeed, just as he argued, never intended to be institutions of healing. Rather, they provided multi-layered experiences of rituals, and the evidence must be seen within this context. The *ex voto* offerings brought to shrines, for example, had many dimensions of intention. The dedications supported the request for healing, or functioned as sacrificial substitutes intended to replace the diseased body parts. If one expands this interpretation of *ex voto*s to include offerings made

8 For literature on the Asklepios cult more broadly and miraculous healings occurring in that context one could refer to numerous studies. They include Kerényi (1959); Walton (1979); Kee (1983) 78–104; Bernidaki-Aldous (1990); Cox Miller (1994) 106–117.

9 See Kötting (1950) 21.

10 Just (1997) 135–137.

11 Bleuler (1916) 388.

12 Garland (2010) 137.

after the cure, that is, as images of thanks for the healings that the suppliants received, this suggests more than a momentary cure of a psychosomatic illness.[13] Moreover, explaining the Epidaurian healing inscriptions as mere propaganda, designed to aid the suppliant or visitor in overcoming any lingering doubts or lack of faith in the power of the god, is a one-dimensional view of this rich material. The wealth of information these texts provide regarding ancient representations and perceptions of disabilities must be appreciated in their own context. A comparative perspective, furthermore, enriches the meaning of the testimony substantially. Here, the comparison of the Asklepiadic testimonies with testimonies of healing at ancient Christian shrines provides important insights.

Particularly ripe for an investigation through the lens of disability studies is the account of Christian miraculous healings in the *Life and Miracles of Thecla*, a hagiographical and apocryphal text from fifth-century Seleucia, a site not far from Antioch in the eastern Mediterranean.[14] The origins of Thecla's cult at Seleucia may date back to the second century, when the apocryphal *Acts of Paul* (*and Thecla*) spoke of Seleucia as Thecla's final resting place.[15] The anonymous fifth-century *Life and Miracles of Thecla*, previously attributed to Basil of Seleucia, was most likely composed by a cleric from that region around 470. The *Life* is testimony that as early as the middle of the fourth century, women and men living as ascetics had established an organized community around her shrine and dwelled there along with lay Christians, both adults and children, among the pilgrims to her site.[16] Ascetics and pilgrims were attracted to the place, because, according to the text, Thecla would provide the sources of healing (πηγὰς ἰαμάτων) for every suffering and every sickness (παντὸς μὲν πάθους, πάσης δὲ ἀρρωστίας). By that time, "the site had become a public healing shrine (πάνδημον ἰατρεῖον) and a site of atonement shared with the whole world (κοινὸν … τῆς γῆς ἀπάσης ἱλαστήριον)".[17] The connection between healing and atonement indicates

13 For the differentiation between these three possible functions of votives, see Kötting (1950) 399.

14 For a recent monograph-length study of the work that seeks to evaluate its literary unity, see Johnson (2006).

15 Lipsius (1891–1903) 269, lines 5–7: καὶ ταῦτα διαμαρτυραμένη ἀπῆλθεν εἰς Σελεύκειαν, καὶ πολλοὺς φωτίσασα τῷ λόγῳ τοῦ θεοῦ μετὰ καλοῦ ὕπνου ἐκοιμήθη. For a discussion of later alternatives to the end of her life and final rest see Cooper (1995) 1–23.

16 On the authorship of the *Life and Miracles of Thecla*, see the edition by Dagron (1978) 13–19; Johnson (2006) 5–6. For the presence of female ascetics at Thecla's shrine in the regions of Seleucia, see the discussion in Davis (2001) 48–80.

17 *Life and Miracles of Thecla* (ed. and transl. Dagron) 280, lines 11–15.

the close relationship between spiritual purity and health. The connection also expresses the search for a style of salvation that integrated bodily and spiritual well-being.

The second half of the *Life and Miracles of Thecla* consists of forty-six chapters, each presenting at least one miracle or wondrous act that Thecla had worked or authorised. An additional miracle, featuring the cure of a boy's paralysis, derives from later traditions.[18] Not all of the miracles that are presented in the forty-six chapters pertain to illnesses, physical or mental, to deformity, or disability. Some passages highlight the miraculous prevention of suicide,[19] the defeat of pagan cults, or the act of conversion. Of those miracles that feature stories of restoring the health of adults or children, only a subset can be identified as centering on issues of deformity or disability as persons in the modern world understand the phenomena. This subset lends itself to a comparison with the healings recorded at the Epidaurian Asklepieion.

The *Miracles of Thecla* contains eleven narrations of healing miracles featuring children or adults suffering from a disability or deformity. They are divided almost evenly between cases of healing full or partial blindness and cases of restoring or preventing the loss of the function of limbs or the limbs themselves. A reader readily notices subsets of these two types of healing temporary or permanent conditions. Blindness emerges as the most prominent condition treated at the shrine, followed by lameness and paralysis, respectively. The text does not feature miracles that are pertinent to the restoration of speech or hearing in a person, although one case of healing an ear-related illness experienced by the author or redactor of the text is included.[20]

The two sets of information from Epidauros and Seleucia posit a range of interpretations in matters of health and healing. The extent of that range depends on what was meant by healing in any specific instance. Healing could include, for example, full acceptance of permanent disability. Such an acceptance would be a powerful transformation, improving the quality of life of the individual and of his or her community. In the healings attributed to Asklepios at Epidauros and Thecla at Seleucia, this healing transformation sometimes came in the form of the suppliant gaining faith or overcoming skepticism.

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18 *Life and Miracles of Thecla* (ed. and transl. Dagron) 413–421, especially 417–418.
19 *Life and Miracles of Thecla*, miracle 19 (ed. and transl. Dagron) 340–343.
20 *Life and Miracles of Thecla*, miracle 41 (ed. and transl. Dagron) 398–401.

3. Medical Anthropology, Healing the Self, and Personal Religion

Sifting through collections of ancient accounts of miracles and healing disabling conditions necessitates an examination of personal religion, in the context of ancient Greek religion and in Christianity in late antiquity. Visitors or pilgrims to the shrine of a god or saint known for healing powers went to the site in the hope of receiving healing, such as the restoration of bodily functions, or at least some improved health. Children were brought along to such healing shrines, not only out of concern for their individual health, but also because children's health was relevant, physically and by representation, to the well-being of their families. The prolonged incapacity of any individual community member interfered with expectations of a favorable collective future.[21]

The emphasis on the interplay between personal and communal well-being that underlay the practice of religion at healing shrines underscores the importance of considering social attitudes towards incapacitation in such settings through medical anthropology. The lens of medical anthropology, a branch of cultural anthropology, deemphasizes biomedical approaches to disease and illness and highlights, among other aspects, the role and function of interpersonal relationships in the healing process and the preservation of health. Building on insights from the study of non-western medical systems, the medical anthropologist insists that health and disease are influenced by the "interdependence between the natural, the supernatural, the society, and the person."[22] In this field, interactions are of prime importance. The ability of the healer, for example, to respect and integrate into the healing process the patient's set of values, social norms, and social roles in the community affects the outcome of any given treatment. In the same way, the participation of the entourage of both the healer and the suppliant are critically relevant to the healing process and to sustained health.[23] In this view, "healing is understood as a culturally determined process that restores meaning to a person's life and experience and reintegrates the person into the social and cultural network,

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[21] For the realm of late ancient Christian literature in Syriac and pertaining to Syria, the intersection between disabilities and illness on the one hand and concerns about the future well-being of the community on the other hand has been examined recently in Horn (2011).

[22] Guijarro (2000) 103.

[23] See also Horn (2009) 175–176. For emphasis on the relevance for the healing process of those who accompany the healer and those who are present with the suppliant see also Hsu (2002) 10–11.

from which illness has separated him or cut her off."[24] Such a separation has multiple and many-layered causes, comprising disease in biomedical terms. The separation also involves other factors that create a distance between the sick person and her or his systems of family and community, systems that, at least in times of health, provide meaning and acceptance in the suppliant's life.[25]

For ancient Greek perceptions of blindness, terminological studies show that medical literature did not portray complete blindness as a condition which could be healed through therapeutic treatment. The few exceptions to this assessment, which Felix Just pointed out in his study of blindness in the context of the New Testament, were the healing inscriptions at Epidauros, records of healing miracles in the New Testament, and the passage in Revelation 3:18, which refers to blindness in an apocalyptic setting, recommending the application of a "salve to anoint your eyes to be able to see" (κολλούριον ἐγχρῖσαι τοὺς ὀφθαλμούς σου ἵνα βλέπῃς).[26] On the whole, "ancient Greek thought did not expect that 'blindness' could be 'healed' by any natural or therapeutic means."[27] There were treatments for various eye diseases that threatened to turn into complete blindness or cases of impairment of one's visual capacity that extended to vision impairment but not to complete blindness.[28] We see a description of cataract surgery in the medical writings of Aulus Cornelius Celsus (25 BCE–50 CE) that, one hopes, was not commonplace.[29] The prognosis of such a surgery was uncertain,[30] and the only literary evidence, derived from magical papyri, is difficult to interpret.[31]

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24 Horn (2009) 176.

25 See Horn (2009) 176.

26 Just (1997) 55.

27 Just (1997) 55. See also Just (1997) 24: "[A]lthough many ancient medical writings devote significant attention to the diagnosis and treatment of eye diseases, they never speak of 'healing' or 'curing' total blindness. The same can be said about most other categories of ancient literature; there may be mention of people being healed of eye diseases, but almost never are those who are blind said to be healed or cured. Instead, most miracle narratives use language that speaks of blind persons' eyes being 'opened,' their sight being 'restored', or similar expressions".

28 See Just (1997) 133–134.

29 See Celsus, *De medicina* 6, 6, 35 and 7, 7, 13–14. See also the comments on cataracts of the eye in the writings of the second-century Galen (129–199/217 CE). See Galen, *De usu partium* 10, 6 (3, 785–786 Kühn).

30 See Just (1997) 134.

31 See Just (1997) 135, note 170. For two papyri texts relating to the healing of ophthalmia, one may consult, for the Greek texts accompanied by German translation, Preisendanz, Heitsch,

Visits in search of healing to the Asklepieion at Epidauros or the shrine of Thecla near Seleucia served the primary purpose of convincing the suppliant, as well as those who witnessed the transformation of the health status of the suppliant and those who learned of it later from the respective inscriptions, that the presumed and perceived 'incurability' of complete blindness, among other conditions, was not an absolute state, but a relative one. The occurrence of healing required a good match between the suppliant and healer, as well as between their collaboration, on the one hand, and all other conditions and relationships that might contribute to remedying the situation, on the other, in order to bring about the desired outcome of healing or salvation.

4. Blindness

Illnesses affecting and incapacitating the eyes occurred widely in the ancient world. Plato mentioned the infection of one's eyes, ὀφθαλμινα, as one of the most frequent diseases, along with gout and fever.[32] Celsus commented that diseases of the eyes should be treated with utmost care because of the central role one's eyes played in all aspects of life.[33] Indeed, partial and complete loss of sight was the single-most prominent chronic disease featured in both the fourth-century BCE texts of the Epidaurian stelae and the fifth-century CE hagiographical and apocryphal *Miracles of Thecla*.[34] At the Athenian Asklepieion, excavations have brought to the fore almost twice as many votives related to eyes than any other votives representing body parts.[35] In other Asklepiadic sites, such as those in close proximity to the

Henrichs (1973) 8. For an English translation of both the Greek and the Demotic material, one may consult Betz (1992), vol. 1, 121 (PGM VII, 197–198) and 247 (PDM XIV, 1097–1109).

32 Plato, *Alcibiades* 2, 139e: "Soc. 'And do you believe that a sick man must necessarily have the gout, or a fever, or ophthalmia? Do you not think that, although he may be afflicted in none of these ways, he may be suffering from some other disease? For surely there are many of them: these are not the only ones'" (transl. W.R.M. Lamb).

33 Celsus, *De medicina* 6, 6, 1: "there are grave and varied mishaps to which our eyes are exposed; and as these have so large a part both in the service and in the amenity of life, they are to be looked after with the greatest care" (transl. Spencer). See also the discussion of the medical treatment of eyes in Jackson (1996) 2228–2251. For comments on eye disease in the ancient world, see also Rose (2003) 85–86. For perceptions of blind people throughout history, see the discussion in Covey (1998) 163–193.

34 The *Life and Miracles of Thecla* contains no references to cases of the healing of either gout or fever. On stele B 23 at Epidauros, the healing of a man from Kios suffering from gout is accounted for. See LiDonnici (1995) 114, lines 132–133.

35 Aleshire (1989) 42.

Roman Asklepieion on Tiber Island, numerous votives in the form of eyes have surfaced as well.[36] Independent of whether or not the relative frequency of this archaeological evidence witnesses actual reversals of blindness, the material certainly suggests widespread occurrence of eye-related health problems. It also shows great concern among those who wished to improve their situation.

If one were to consider in greater detail the textual evidence for the treatment of visual disability at Epidauros, one would notice that the only explicitly documented case of a woman whose sight was healed at that Asklepieion was that of Ambrosia from Athens.[37] The relevant inscription characterized her as having been [ἁτερό]πτ[ι]λλος, or "blind in one eye," as Lynn LiDonnici rendered the Greek term.[38] More literally, the Greek word means, "one of the other eye," emphasizing the recognition that a difference exists between a person's two eyes. The ancient audience might not immediately have thought of her as being "blind in one eye," but perhaps rather as "capable of sight in one eye," or "half-blind," or "of limited visual capacity," or simply may have acknowledged that there was an imbalance between the capacities or shapes of her eyes.

Although Ambrosia "came as a suppliant (ἱκέτις) to the god," likely intending to request healing and having some hope of receiving it, she demonstrated her lack of trust in the reliability of the witnesses to healing miracles that were on display at the shrine and that she seemed to have been able to see, albeit with an attitude of ridicule (διεγέλα). She denied the probability and possibility (ἀπίθανα καὶ ἀδύνατα) that "the lame and the blind (χωλοὺς καὶ τυφλοὺς)" could "become well (ὑγιεῖς γίνεσθαι) from only seeing a dream (ἐνύπνιον ἰδόντας μόνον)." During her incubation (the ritual that constituted the regular and customary cultic practice at this and other healing shrines in the ancient world), she "saw a vision (ὄψιν εἶδε)," in which Asklepios told her "he would make her well (ὑγιῆ μὲν νιν ποιησοῖ)." With its emphasis on the god's action, the text highlighted the lesson Ambrosia was expected to learn. Contrary to her earlier estimation that reversals of certain conditions, namely lameness and blindness, were not possible (ἀδύνατα),

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36 See the edition by Pensabene (1980); and the article by Jaeger (1988).

37 LiDonnici (1995) 88–89, lines 33–41. On p. 89, note 10, LiDonnici notes that the identification of the home town of a woman is represented by the preposition εκ, whereas in the case of men, no such additional preposition is employed. See also Wainwright (2006) 212, note 45, for further comment.

38 For a discussion of ancient Greek terminology of visual impairment, see Rose (2003) 80–81 and 84.

the god declared his power to act on these conditions. Asklepios dispensed healing during her sleep by way of a decidedly practical approach. The testimony tells us that he "cut her sick eye (ἀνσχίσσαι … τὸν ὄπτιλλον τὸν νοσοῦντα) and poured a medicine over it (φάρμακον τι ἐγχέαι)."[39] With the start of the day, she was able to walk away, being well (ὑγιὴς ἐξῆλθε).[40]

The record of Ambrosia's perception of her visual impairment is instructive. She categorised herself within the group of blind people, even though she still had the ability to see with one eye. How much she could see with the eye that was not impaired can only be deduced indirectly. Since Asklepios is said to have treated her "sick eye" with medicine, her other eye may have not needed any attention; it may have been fully, or almost fully, functional. Neither Asklepios nor Ambrosia showed any concern about it. The text suggests that despite the condition of her eye, neither her physical nor her mental ability to see was impeded. Not only was she aware of the dedicatory plaques that were on display when she first arrived at the shrine, but she also "saw a vision" during her incubation. Seeing a vision, in comparable testimonies, is a literal experience, not a metaphor; then again, seeing a dream was also a literal experience in ancient Greek records.

As Ambrosia's testimony demonstrated, the state of one's physical ability or inability to see had little or no impact on one's mental, psychological, or spiritual capability to exercise the function of sight. Tales in which people were struck with physical blindness and then received a kind of recompense in the form of extraordinary abilities of sight are well known. Such seers, Teiresias being a well-known example, could see and foresee events clearly.[41] The Epidaurian healing inscriptions did not grant Ambrosia the mantle of a prophet or seer. Yet she did become a seer of sorts on an individual level: her ability to see a vision of the god healing her eye underscored the understanding that a person's vision impairment was limited to hindering only that person's physical vision. Sight impairment neither affected one's mental capacities nor did it limit one's spiritual capabilities.

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39 For the description of the healing of a suppliant's eye-sight that involved the practical measure of "the god boil[ing] some drug, and then dr[awing] apart his eyelids and pour[ing] it in" see the story recounted on stele A9 (see LiDonnici (1995) 92–93). See also the story of Timon recorded on stele B20 (see LiDonnici (1995) 114–115). For a discussion of eye surgery in the ancient world, see Jackson (1996) 2243–2250.

40 Many of the testimonies at Epidauros end with a comment that the suppliant walked away, being well.

41 On Teiresias, the blind seer, see for instance Kelley (2007) 41–44.

Ambrosia's record emphasised the connections between faith and healing as well as the consequences of their interplay.[42] The story suggested to its audience that one's experience of well-being was a direct manifestation and a result of one's relationship to the realm of the divine. Only the suppliants with faith in Asklepios received health or restoration, even if faith came as a result of the healing. Ambrosia's case is particularly instructive as it showed that faith could be learned. Ambrosia had the chance to acquire the insight or knowledge to facilitate her healing immediately at her arrival to the shrine, but she had scorned it. The god demanded that she pay "a fee (μισθὸν)" in the form of "dedicating a silver pig (ὗν ἀργύρεον) in the sanctuary as a memorial of her ignorance (ὑπόμναμα τᾶς ἀμαθίας)," or, more literally, as a "memorial [set up] for her lack of learning."[43]

The pedagogical and propagandistic purposes of the inscription concerning Ambrosia intersected. Like Ambrosia, the audience was to understand that, while "walking about the sanctuary," observing the inscriptions and plaques (and, depending on the setting, perhaps also the terracotta votive offerings of eyes), they were to regard these objects as testimonies to the healing of sight impairment, regardless of the capacity of physical sight in any given person's eyes. The suppliant had to learn and consequently have conviction about the abilities of the healer/physician and the potency of the curative complex. Full health necessitated both knowledge and acknowledgment of the testimonies of healing.

Ambrosia's experience fit in well with that of a formulaic set of suppliants who approached Asklepios while remaining skeptical about the reality of healings at the shrine. Yet of all the surviving cases of healing chronic conditions recorded on the stelae at Epidauros, her case was the only one in which the text clearly demanded the payment of a fee in the form of an object of significant monetary value in response to healing.[44] Gender may

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42 For a discussion of the interrelationship of faith and health especially at shrines dedicated to Asklepios see Compton (1998).

43 That ignorance was perceived as leading to negative consequences is a theme featured for example in the reference to the 'sin of ignorance' in *Pseudo-Clementine Homilies* 9 where it is identified as the act of lying with women during menstrual impurity. For discussion, see Kelley (2007) 85–86.

44 In the story recorded at stele A6 (see LiDonnici (1995) 90–91), Asklepios demanded that a fillet or band that had been used in the healing process for Pandaros of Thessaly be dedicated to the temple. The money in question in the related story recorded on stele A7 pertained to a voluntary dedication. The ten dice Asklepios was willing to accept in the story recorded on stele A8 (LiDonnici (1995) 92–93) were children's toys, and likely not of significant monetary value. The value of the offerings to be sent to Epidauros that Asklepios demanded of Sostrata of

play a role, and one could explore differences between male and female suppliants with regard to their financial interactions with healers at shrines. The data from the stelae at Epidauros raise questions about the extent to which women's financial resources affected the opportunity to visit a healing shrine. Such a visit was almost always a lengthy, complicated, and expensive venture.

Votives or dedicatory inscriptions were offered by many visitors, both men and women, who sought healing at the shrines. While such tokens of gratitude were expected, explicit exhortations to any individual suppliant to make such an offering as a payment do not appear frequently in the extant Epidaurian material. A man relieved of paralysis in his fingers in the inscription on stele A3 had to pay for his healing in the form of accepting a permanent memory of his healing experience from Asklepios.[45] In contrast to Ambrosia's fee, though, his payment did not involve the purchase of an object. Instead, Asklepios assigned to him an epithet that would affect his reputation. He was to be known as "the faithless one," a potentially embarrassing nickname, for the rest of his life. In Ambrosia's case, although the text of stele A4 does not provide further specifics regarding her financial status, the demand of an *ex voto* may have had the impact of burdening her in a twofold manner: first, although it would have cost some sum, one cannot easily estimate whether or not paying for the silver pig constituted a significant financial burden for her. Even assuming that Ambrosia completed her assignment, we do not know the pig's size, craftsmanship, or fate. For the shrine at Epidauros, such a gift enhanced the treasury. Like all *ex voto*s that were dedicated at Asklepieia, their precious metal could be used for manufacturing or purchasing other objects for the shrine. Ambrosia was not merely charged with paying a certain amount in silver, though: the pig itself, not just the silver, is significant.

The communal sacrifice of piglets in Greco-Roman cult settings, notably in the Eleusinian Mysteries, is well known; the individual donation of a pig may have been an expression of humiliation for Ambrosia's doubting the records of the healing accomplishments of the god.[46] In this case of a woman who doubted, emphasis appears to have been placed on her doubt originating in

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Pherai remains undetermined in the text (see the text of stele B5 at LiDonnici (1995) 104–105). For a further dedication of profits from a sale that may have had considerable value but that was voluntary, see the story of the fishmonger Amphimnastos on stele C4 (LiDonnici (1995) 120–121).

45 See LiDonnici (1995) 86–87.

46 For depictions of sacrificial pigs, see for instance the case in Lawton (2007) 46–47, with fig. 2.3.

her ignorance. The image of the soul in Plato's *Phaedo* suggests a context for the inscription: the image of the soul of one who was a lover of knowledge as "wallowing in utter ignorance (ἐν πάσῃ| ἀμαθιᾳ| κυλινδουμένην)."[47] Those who neither sought nor gained knowledge could readily be thought of as rolling around in their ignorance, behaving like pigs. The audience of stele A4, steeped in the fourth-century philosophical context of ultimate ignorance, would view the "silver pig" as a visual manifestation of Ambrosia's ignorance. The nonbeliever was humiliated, and the story was amplified by its feminine qualities. In the view of those who followed Plato's ideas, the soul, including a soul wallowing in ignorance, was to be thought of as feminine.[48]

The man who had paralysis in his fingers was named an unbeliever because he was "disparaging of the inscriptions (ὑποδιέσυρε τὰ ἐπιγράμμα[τ]α)" when he first saw them. The verb ὑποδιάσυρω suggests that he thought himself to be above the written evidence; his disbelief shredded the written record.[49] Ambrosia, too, "ridiculed some of the cures (τῶν ἰαμάτων τινὰ διεγέλα)," especially those pertaining to lameness and blindness, with the Greek verb διαγελάω referring to a more casual mocking or laughing at an object or a situation. In both cases, the stories on the stelae taught suppliants that a lack of belief would lead to their humiliation and ridicule.

In these instances, no suggestion emerged that people with disabilities were ridiculed or humiliated for their conditions. On the contrary, the only noteworthy blemish was the stain of one's disbelief, not the acknowledgment of one's incapacities. Nonbelievers risked permanent deformity that would survive beyond their lifetimes as aural or visual memories.[50]

As in the case of Ambrosia, and in cases at the shrine of Thecla, some aspects of ancient healing accounts served as a means of propaganda that aimed at attracting precious metal to the shrine and increasing the authority of the shrine's hierarchy and cult. Ulterior motives aside, events that were situated within the framework of conceiving of healing as a means to social

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47 Plato, *Phaedo* 82e (transl. H. North Fowler).

48 For a discussion of the symbolism of the pig wallowing in mud representing the soul in its ignorance in comparison to the early Christian figure of Thecla, see Spittler (2008) 168.

49 See the text of stele A3 at LiDonnici (1995) 86–87.

50 To the extent to which the lack of faith in divine power emerges from this material as a topic illustrating disbelief as a form of disability, that is, as a lack of one's ability to engage with one's body/mind in healthy, wholesome relationships with the realm of the divine, the parallel between Ambrosia's case and the story of Sarah in the Hebrew Bible is remarkable and deserves further study, but must be relegated to a different occasion.

acceptance were part of a wider spectrum of real or apparent physical cures. Temple cures were part of a wider framework of social integration. Premodern cultures throughout the Mediterranean world approached health through the holistic assessment of any given person's place in the world. The physical state of one's body and all its parts, one's acceptance of what could not be changed, as well as the proper functioning of one's social network would be taken into account. Belief in divine providence and assistance had a comfortable place within such an assessment.

Healing also took into account one's embodied nature, including one's gender, and its consequences. The story of Pausikakos, in the *Life and Miracles of Thecla*, is instructive of gendered intersections with blindness. Pausikakos was a poor manual laborer who became blind (καὶ τυφλωθεὶς)[51] because of the negligence and incompetence (ἢ ἀμελείας ἢ ἀτεχνίας) of physicians.[52] His name, meaning "ending evil," might have been selected for didactic reasons and might have served to qualify and judge blindness as an evil quality. The healing he experienced through Thecla's help allowed him "to recover the light, which had abandoned him" (διὰ τῆς μάρτυρος αὖθις τὸ ἀπολεῖψαν αὐτὸν ἀνεκτήσατο φῶς).

On coming to Thecla's cult site, Pausikakos stayed at a small grove of myrtle bushes just outside the shrine, wherein he believed the virgin Thecla was present.[53] He could not be stopped from crying out his lamentations and supplications, intending to relent only once he had regained what he had lost (πρὶν ὅπερ ἀπώλεσεν ἀνεκομίσατο). The description of his healing process offered in the *Miracles of Thecla* may not coincide with medical accounts about the procedure that took place. In the view of G. Dagron, the editor of Thecla's miracle texts, Pausikakos had at least one cataract, and possibly more: the text stated that scales (or spots) fell away from Pausikakos' eyes (φολίδων γάρ τινων ... ἐκ τῶν ὀφθαλμῶν ἔνδοθεν ἀποπεσουσῶν) and that the darkness (or mist) that had altered his pupils also fell away (καὶ ἡ τὰς κόρας ἀχλὺς ἀλλοιοῦσα) and the light entered again (ἀντεισῆλθε τὸ ἀρχαῖον φῶς).[54] The terminology the text employed here with reference

51 Of the four manuscripts that offer the text of the *Miracles of Thecla*, the tenth-century MS Vaticanus Graecus 1667 does not add the detail that Pausikakos experienced blindness in this instance.

52 *Life and Miracles of Thecla*, miracle 23 (ed. and transl. Dagron 348, line 6). See Gourevitch pp. 82–83 in this volume on ignorance of the doctors.

53 Both Thecla and Asklepios were thought of as moving about at their respective shrines rather than residing in a particular spot such as an altar or a cult statue.

54 *Life and Miracles of Thecla* (ed. and transl. Dagron) 348, lines 16–18, and 349, footnote 4.

to the pupil (κόρη) of Pausikakos' eye, literally meaning "young girl," is known from ancient Greek texts as a designation for one's eye more broadly, and more specifically for the dark center of the eye. One is able to see one's own reflected tiny image in the eyes of the person at whom one is looking.[55] Although the term is used elsewhere in the *Miracles of Thecla* in a straightforward manner to refer to the pupil of the eye, by choosing to employ this term in the present context, Thecla's hagiographer made possible a gendered interpretation of the experience of being blind and attempting to regain one's sight. The gestures, utterances, and attitudes of Pausikakos—his lamentations, supplications, crying, and boldness—and his vow to remain in his place until the saint restored his sight show a decidedly more vocal and emotional behavior in comparison to that of Asklepios' suppliants. In addition, the contrast between depicting Thecla as a virgin who freely enjoyed and preferred nature in the form of a myrtle grove over the confines of an architectural shrine or temple on the one hand, and the male Pausikakos entering, almost intruding into that space, locking himself in there, and insisting on not leaving until he obtained what he desired reversed the female and male spatial locations of the Greek realm. The aristocratic Greek daughter or wife, in the ideal, confined herself in the enclosed space of a house, while fathers and husbands moved about in open, public spaces. In addition, and more in line with gender stereotypes, Thecla was not referred to by her name but as the 'virgin' whom Pausikakos pursued with laments, supplications, and cries. Altogether, this is a scene of a young virgin and her avid suitor, who was determined to have victory over the virgin by subjection, possession, or union. Pausakios' verbal aggression and his intrusion of space was stereotypical male behavior. In the course of the healing process, during which his blindness was removed, the gendered attributes shifted again. The healing process was captured in the detail of scales falling from Pausikakos' eyes, transforming his eyes to a pristine appearance and unveiling his eyes from what had kept the light away from them. His pupils, furthermore, were literally "girls," which suggested that the process of restoring Pausikakos' eyes and sight brought forth the female gendered aspects of his body and his bodily experience that had been hidden by blindness. While blindness here was understood as an experience of maleness, the restoration of sight

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[55] See for instance Plato, *Alcibiades* 132e–133a, in which Socrates posits that "you have observed that the face of the person who looks into another's eye is shown in the optic confronting him, as in a mirror, and we call this the pupil, for in a sort it is an image of the person looking?" (transl. Lamb).

manifested at least a more evenly distributed gendered identity, perhaps to be interpreted as a restoration of full masculinity. Through being healed by a woman, the blind male suppliant experienced not only physical healing, but also the restoration of valuable aspects of femininity. For Pausikakos, this full healing included the capacity to receive light, both physically and experientially. Being relieved of blindness did not transform Pausikakos from a man into a woman, but the audience was left with the impression that the process of healing involved a rebalancing of the expressions of femininity and masculinity in any given person.

Pausikakos experienced a social transformation through his healing. Those who for a long time had seen him as a blind person (οἱ ἰδόντες τυφλὸν ἐπὶ χρόνον οὐκ ὀλίγον) now realized that he was sighted (εἶδον καὶ βλέποντα ἐπὶ χρόνον πολὺν), that he worked in his profession, and that he was able to support himself in all ways (τὸν βίον ἐκ τούτων ἐρανιζόμενον ἀφ ὧνπερ καὶ τὸ πρότερον ἐποιεῖτο). In addition, the text emphasized the eyewitness account of the populace at Seleucia, who had encountered the blind Pausikakos before his healing as well as afterwards. The transformation that healing brought for the person who was healed was embedded into and had a significant impact on society at large.

The presentation of Pausikakos' case provided the ancient author with the opportunity to voice a polemic against physicians and against putting trust in the physical cure alone. The presentation also criticized the belief that the only relevant matter in illness or health was the physical state of the body. The story depicted a miracle of restoring physical sight in the context of a joining of male and female aspects of the human body, which stood as a metaphor for the restoration of the whole person.[56] In Pausikakos' story, restored sight stood for the possibility of transition and transformation; blindness stood for the inability to earn a living and consequent reliance on others for one's subsistence. Pausikakos' story functioned as one example of how a significant

[56] The *Life and Miracles of Thecla* relates at this instance to ideas that are expressed best elsewhere in early Christian literature in the form they take in the *Gospel of Thomas* with its (in)famous Logion 114 ("Simon Peter said to them, 'Mariham should depart from among us, because the women are not worthy of life.' Jesus said, 'Look, I will guide her in order to make her male, so that she too will become a living spirit, comparable to you men. For every woman who makes herself male will reach the kingdom of heaven.'"). Yet the careful examination of that connection is a task for another study. For the critical text of Logion 114 in Coptic, see Leipoldt (1967) 52. For the present translation offered in conjunction with a discussion of the material in the wider context of perspectives on women in apocryphal writings see Horn and Phenix (forthcoming).

sight impairment could threaten a person's economic existence and how regaining one's sight could provide a way out of impending poverty.[57]

The miracle accounts at Epidauros and at Meriamlik, near Seleucia, are among the few ancient sets of witnesses to overcoming blindness. As Just's study emphasized, most blind inhabitants of the ancient Mediterranean world did not expect to receive physical cures. This applies within the Jewish and Christian framework, where we see limited access to cures. Throughout the texts of the Hebrew Bible and the New Testament, physical blindness was not usually cured. Curing blindness was the exception, not the rule. Some of the evidence in the miracle accounts from Graeco-Roman and Christian shrines, however, offers witnesses to the possibility that accompanying conditions, such as the shame for being blind or having a blind family member, might receive healing. Miracle 24 in the *Life and Miracles of Thecla*, for instance, provides an instructive example of the disability of shame and how it could be overcome. Shame over the condition of blindness constituted a significant aspect of the disease, and the saint was able to cure this condition.

Miracles of Thecla 24 told the story of a young child (παιδίον) from Olba, a town near Seleucia, being healed from a condition that had developed in one eye. He was at the age of weaning from his nurse's breast (ἀπότιτθον ἄρτι γεγονός) and able to walk, perhaps about two years old.[58] His excessive crying (ὑπὸ τοῦ ἄγαν κλαυθμυρίζεσθαι) was thought to constitute a danger for the health of at least one of his eyes (τὸν ἕτερον τῶν ὀφθαλμῶν ἐκινδύνευσεν). As crying involves repeated and often prolonged exposure to bodily secretions, at least one scholar, Dagron, has suggested that the child's eye disease was related to trachoma.[59] Whatever the precise nature of the disease, its treatment was beyond the medicine of the day (ἰατρικῆς εἶναι λοιπὸν τὸ πάθος δυνατώτερον). The text did not explore whether or not a connection existed

[57] The connection between disability and economy has not yet been discussed systematically for the ancient world. For some considerations pertinent to modern civilization, Drake (2001) provides helpful insights. For antiquity, see Rose (1997). For a discussion of ancient evidence that manages to counter the necessity of assuming that all blind persons in the ancient world were among the begging poor, see Just (1997) 126–129. For the assumption that the poor of the lower classes often had no other option than that of becoming beggars: see Parkin (2006). Yet with Rose one might question this assumption, given that blind people could also be involved in the performance of at least a subset of the same agricultural or household tasks on a daily basis and be a valuable asset to the family system.

[58] *Life and Miracles of Thecla* miracle 24 (ed. and transl. Dagron) 350–353, here 350, line 2, and 352, lines 29–32. See also *Life and Miracles of Thecla* (ed. and transl. Dagron) 134.

[59] See also *Life and Miracles of Thecla* (ed. and transl. Dagron) 134 and 351.

between the child's weaning and his heavy tears, but one suspects that the disruption of the physical expression of the emotional bond between child and nurse could have played a role in the development of a defective eye due to crying.

In this miracle account, crying was emphasized as affecting multiple parties. With lamentations, supplications, and tears (μετ̑ ὀδυρμῶν καὶ λιτῶν καὶ δακρύων), the wet-nurse (ἡ τίτθη) showed the child's disability (τὸ τραῦμα τοῦτο) to the martyr Thecla at her shrine. Here the *Life and Miracles of Thecla* vividly expressed the fear of damage being done to the individual as well as the social damage that the loss of one's eye-sight might produce. In her prayers, the nurse emphasized the negative prospects the child would have to face for life if he were left with such a deformity. She referred to the eye-disease as causing the child a disgraceful, unseemly, and shameful state and appearance (ἀκαλλές τε καὶ ἀπρεπὲς καὶ ἐπονείδιστον πρᾶγμα καὶ σχῆμα). One of the expected results of the disease and the associated deformity was that most of the charm of the child's face would be destroyed (τῆς ὄψεως ἀπολλύον χάριν) by taking away half of its sharpness and ability. The misfortune of a deformity marring one's face was underscored by the declaration that sight was God's most beautiful creation (τὸ κάλλιστον ... μάλιστα τοῦ Θεοῦ δημιούργημα) in humankind. One finds here a critical juxtaposition between the threat of blindness as a disabling condition within one's mortal life and sight as the pinnacle of God's work as creator. Disability on the one hand, and on the other hand God's will for humankind—or even more broadly the whole world—were understood as being opposed to one another. The wet-nurse's judgment spelled out anthropological dimensions clearly. According to her, no other body parts were as beautiful (καλὸν), necessary (ἀναγκαῖον), and useful (χρήσιμον) as eyes that are fully capable of perceiving, and being filled with, light. A person's eyes could both see and shine; in other words, they both received and dispensed the light. In this way, the face with its eyes was comparable to the sky.[60] If one removed one of the lights of the firmament, namely the moon, the sky itself would lose much of its beauty and the earth likewise would lose the light that illuminates the night. The nurse's theological assessment of the consequences of blindness revealed and combined anthropological and cosmological dimensions of the threat of that disability.

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60 *Life and Miracles of Thecla* (ed. and transl. Dagron) 351, note 4, commented that Pseudo-Caesarius, *Dialogi* 3, 40 (PG 38, 1057) also compared a person's two eyes to the sun and the moon. See also Rizini (1998).

The text presented the miracle that Thecla performed in response to the nurse's pleas as a light-hearted and humorous response to the situation. Thecla neither ridiculed the wet-nurse's fear nor the child's condition. In order to benefit from the healing process, neither the child nor his caretaker were required to do anything. The miracle simply happened to the little boy in the midst of the courtyard at the temple, an open space, where nature and culture met. There, people enjoyed themselves by feeding the doves, swans, cranes, geese, and other birds, all offerings of the pilgrims. Amusing himself amidst the birds in the courtyard, the young boy chased and was chased by some of the birds, offering entertainment to anyone who was watching. Then in one motion, one of the cranes, which the child had tried to prevent from eating, leapt up and punctured the child's diseased eye with its beak (τῷ ῥάμφει τὸν ὀφθαλμὸν ἐκεῖνον ἐγκολάπτει τὸν καὶ ἤδη πεπονθότα). In shock, the women and the wet-nurse thought all was lost. Instead, the reader learned from the text that the bird's attack provided exactly the right treatment for the disease (θεραπεία ἦν τοῦ πάθους καὶ ἀκός). As if having been pierced skillfully (σὺν ἐπιστήμῃ) by a physician's scalpel (ὑπὸ ἰατροῦ καὶ σιδηρίου), as the text formulated, the pupil (κόρῃ) of the eye rid itself of the pus. This description evoked the body's powers to heal itself in collaboration with nature: here, the beak of the crane became a medical instrument.[61] As a consequence of nature's work as a physician, the child was able to see again for the first time (ἀναβλέπει τότε πρῶτον τὸ παιδίον) and to regain the light that his eyes had lacked (ἀπολαμβάνει τὸ ἐπιλεῖπον τοῖν ὀφθαλμοῖν φῶς). The healing also resulted in the disappearance of any lack of symmetry in the child's face (ὡς κατὰ μηδὲν ἐπιχωλεύειν τὴν ὄψιν). The young boy was able to return to his city and family, now perfect and complete in all parts (ἄρτιον καὶ ὁλόκληρον). His healing evoked the greatest expressions of astonishment from his city, his father (πατὴρ) Pardamios, and his grandfather (πάππος) Anatolios, who served as priest of the church of Olba.

Ocular problems had created a separation between the boy and his community of origin, a social network that consisted at the minimum of three layers: the little boy's family, the polis, and the church, to which he belonged by virtue of the prominent ecclesiastical roles which his father and grandfather played. The child's deformity threatened separation from his family and community. Reunification took place after healing had restored at least the perception of perfection and symmetry in his physical appearance.

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[61] For discussions of ancient medical instruments in different regions see for example Künzl (1996); Baker (2002) 23–27.

This fifth-century Greek Christian text also showed the role of deformity as a factor of interference with ancient Greek ideas of beauty and perfection. The explanations of the child's wet-nurse voiced perceptions of sight impairment that fit a medical or functional-limitation model modified by an approach to healing that ascribed to the work of nature a substantial role in the process of establishing and reestablishing health. Quasi-medical tools—namely the bird's beak—which were derived from nature and which worked under the guise of a struggle for survival, were the critical location for healing the disability of blindness.[62]

The narrator of Thecla's healing miracle focused not on ridiculing disability, but instead on the fear of the wet-nurse. This caretaker had contributed to the child's misfortune through her concern about the shame of sight impairment and deformity at all stages of the child's future development. This passage was also a statement of propaganda for faith: in this case, the trust and faith of the female caregiver who sought healing from a female healer. Healing came about through the agency of nature, which was also characterized as female. Mother Nature, in the role of healer, surpassed technical, functional medicinal practice.[63]

The intimate interplay between healing and functional ecology, or the world and context, in which the sick person lived, found expression in yet another miracle centering on the experience of blindness. In miracle 25, the intervention of the divine healer brought about the healing of the blind person's world, even though the physical condition remained. The saint removed the shame that divided the suppliant from society. The story emphasised the saint drawing the community together. This miracle offered the author's recitation of a recent event of healing an eye-disease, of which he himself had been one of the beneficiaries. An epidemic affecting the eyes (πανδήμου γὰρ ὀφθαλμίας) had spread, causing a copious flow of stinging liquid moving upward in people's bodies, into their head and towards their

[62] For further reflections on the medical or functional-limitation model, see Craemer (2009) 22–25. An alternative model Craemer discussed (pp. 25–26), is the social or minority group model, which does not seem to be reflected in the approach to disability the author of the *Life and Miracles of Thecla* espoused.

[63] The role of animals as agents or mediators of healing in cases of the sickness of children remains a topic that requires further exploration. In the Epidaurian healing inscriptions, several cases of children receiving healing through physical contact with animals are to be noted. See Kunz-Lübcke (2007) 62–70, who dealt with events in which children were exposed and then rescued, nurtured, or saved through animals (e.g., Romulus and Remus and the she-wolf). For the image of Mother Nature at work in the world, see for instance Quintilian, *Institutio oratoria* 12, 1, 2 (text and transl. Butler).

eyes. Medical practitioners were unable to apply any preventative remedies (τοῖς ἀλεχητηρίοις τούτοις φαρμάκοις), because the liquid flowed from the eye in such a way that any remedies that were applied to or under the eyelashes were washed off and thus ineffective.[64] While the patients' eyes remained destitute of any relief (ἐρήμους μὲν εἶναι βοηθείας τοῦ ὀφθαλμοῦ), even the physicians, who were embarrassed and powerless, felt overcome by that evil (ὑπῶ τοῦ κακοῦ νικωμένους) as they themselves, together with all others, fell victim to the disease (καὶ αὐτοὺς ἤδη καὶ συνεχομένους ὑπὸ τοῦ ἴσου κακοῦ).[65]

The character of the disease, which had become an epidemic, affecting everyone, offered the author of the text the opportunity to present Thecla as the healer of the human race (ἡ μάρτυς, τὸ τῆς ἀνθρωπίνῆς φύσεως ἀλεξητήριον).[66] The text characterized the disease as inhuman in nature and as relentless (τὸ πολυάνθρωπον οὕτω καὶ ἀπάνθρωπον πάθος). In her compassion (ἐλεῄσασα), Thecla provided a place of treatment within the enclosure of her shrine (ἐν τῷ αὐτῆς τεμένει τὸ ἰατρεῖον). By passing on the knowledge of the remedy to an infected person, Thecla in effect called everyone to her (προσκαλεῖται δὲ κοινῇ πάντας ὡς αὐτὴν). One night (νύκτωρ) she communicated to one of those affected by the disease that everyone so affected should use her bath (τῷ αὐτῆς χρήσασθαι λουτρῷ), which was the treatment site (τοῦτο γὰρ ἦν τὸ ἰατρεῖον). The communication occurred at night, suggesting that the message was passed on in the context of a dream, even though the text did not specifically state this. Bathing at the shrine would have been an appropriate means of fighting the eye disease (ὅ τῷ μὲν νοσήματι τῆς ὀφθαλμίας πολέμιον ἦν). Such treatment could fail, however, without the cooperative energy of the martyr (τῇ ἐνεργείᾳ τῆς μάρτυρος). Such collaboration, when it occurred, resulted in powerful treatments, and they had to be so, since the well being of the entire city was at stake (ἄκος μέγιστον ὅμου πάσῃ τῇ πόλει γεγένηται). Cures in accordance with nature, even those natural cures at the shrine, had to work in unison with and be activated by the martyr. Likewise the city, the community of those who lived there, had their strongest, most powerful means in hand when they worked together with one another, when unanimity ruled among them.

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64 *Life and Miracles of Thecla* (ed. and transl. Dagron) 355, note 2, refers to the case of an epidemic affecting the eyes recounted in *Miracles of Cyrus and John* 9 as well as to the fact that book II of the work of Alexander of Tralles, which dealt with eye treatments, provided recipes for eye ointments and salves. On optical salves in the ancient world, see Bayer (1950).

65 *Life and Miracles of Thecla* (ed. and transl. Dagron) 352–355.

66 For considerations of the idea of the healer as savior, see for instance Csepregi (2012).

The healing experience that is recounted in miracle 25 changed those affected both physically and in their outlook on life. Some of those who walked to the shrine, their eyes sealed shut by mucus (συμμεμυκόσιν ὀφθαλμοῖς), were not able to enjoy the route as they went up the hill, groaning and in tears. When they left, however, they went down the hill joyfully, singing the martyr's praises, with their eyes wide open (ἀναπεπταμένοις τοῖς βλεφάροις). The healing power of the spring of water, which the author praised as most abundant and incorruptible (τῆς πλουσίας καὶ ἀφθονωτάτης πηγῆς), might have reminded a Christian audience of the fountain of baptism. That almost all availed themselves of the bath over a short period of time did not diminish the power of the spring.[67] After three to four days only a small number of people still suffered from the disease. In their cases, the author presumed that these few either lacked faith (ἀπιστία) or adhered to another vice in their lives (βίου κακίας). Through special arrangements on the part of the martyr, these select few folks who were not healed then were excluded from the assistance that had been extended to everyone else (τῆς κοινῆς βοηθείας). The emphasis on that small group suggested that those who did not receive healing may have served as examples in order to teach the rest of the population about the severe nature of the evil (μάθοιμεν ὅσον ἦν τὸ κακόν) that had befallen them. Those who were not healed transitioned from being incapacitated to being disabled, in the full sence of the word in its ancient context. They became blind (τύφλωσιν ἐπήγαγεν), completely losing sight either in both eyes together, or in one of their eyes (ἢ γὰρ καὶ τῶν δύο ἅμα, ἤγουν τὸν ἕτερον τοῖν ὀφθαλμοῖν πάντως ἐξέκοψεν). The transition from the perception of visual impairment as a temporary state to being disabled permanently with blindness is interpreted in the text as a form of punishment. This punishment, which was endured by the respective individual for his or her religious or moral misbehavior, characterized what was deviant in the Christian community of Seleucia. In this miracle story, the disability of being physically marked as a chronic miscreant, functioned as a criterion of separating members of the insider community from those of the community outside.

The author of the *Life and Miracles of Thecla* concluded with his own spiritual interpretation of what had happened in the cases of failed healing. In order to identify the deeper spiritual reality that united the members of the two groups with one another and, at the same time, distinguished the two

[67] On the use of baths for medicinal purposes in antiquity, see for instance the discussion in Heinz (1996).

groups from one another, the author commented that the evil manifested as a most terrible phenomenon (δεινότατον ἦν τὸ κακὸν) and a truly demonic plot (τι δαιμόνιον ἐπιβούλευμα). Once being defeated by the miracle (ἡττηθὲν δὲ ὅμως τοῦ θαύματος), it was as if the evil that had given rise to blindness had never been seen, and it disappeared along with its mark.[68] Such comments likely suggested that an eye disease epidemic was to be understood as a test of the community's spirit, a test that resulted in discerning and sorting out those who had faith and trust in the martyr from those who did not or whose moral standards were insufficient. Those who remained blind thus manifested their spiritual affiliation with the demonic realm in their earthly appearance.

Within the framework of material concerning the disability of blindness that is available in the Epidaurian and Seleucian miracle texts, miracle 25 of the *Life and Miracles of Thecla* constituted one of the few, perhaps even the only surviving instance, in which a clear distinction was offered between disease and disability. The differentiating criteria included time and choice. Those who had a disease and who, despite all medical and health-care related interventions, continued to suffer its consequences were liable to be grouped as disabled. In this definition, disability was the failure to receive healing: the ability in question was the ability of the person to muster sufficient faith in the power of the healer. Associated with this judgment was the proposed identification of the one who was to be blamed for a disability. Disability in this case was seen as a literal trait of those with chronic illness. Each person was morally responsible for healing his or her own body, for restoring his or her health. If a person's ocular system was not healed, it was that person's fault, since healing was available. Miraculous healing was available only to those who put their faith to the test, and passed that test. Disability, the inability to have sufficient belief, was accompanied by a physical mark of this disbelief. Disability was seen as a punishment on the part of a force that transcended human power. The person who sought healing needed the assistance of a savior who herself or himself was outside of the realm of mortals. The ability and inability to heal oneself was a group phenomenon as well. Those with a transient inconvenience, such as clouded and painful eyes, formed one group; those who did not allow themselves to receive a cure constituted their own group. Community ideas and ideals prominently shaped this framework of disability.

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68 See *Life and Miracles of Thecla* (ed. and transl. Dagron) 354–355.

The propaganda at work in the account of miracle 25 is pronounced. The author promoted the use of the baths at the shrine and the influence of the saint and her cult by suggesting that the ultimate effective cure was a combination of medicinal means with faith in the power of the healer. Such a cure effected the transformation of the person's conditions. Indeed, this socially contextualized transformation was a meaningful assessment of health.

Much of the material on blindness in the Epidaurian and Seleucian miracle accounts focused on the need to realize the difference between disease and chronic disease, the latter of which required the assistance of a healer or savior to be overcome. Only those who committed themselves to the idea that they needed the saving work of the healer could experience the reality of healing from their chronic disease and prevent a public declaration of their disability. One story, however, took the matter of the moral responsibility of the sick person one decisive step further. Through its representation of a dense conglomerate of multiple forms of disability affecting a single person who was not granted any release from it, miracle 35 in *Life and Miracles of Thecla* strengthened the message that everyone was in need of a savior figure, and extended the message. This story posited that one's ultimate reliance upon such a savior did not, after all, guarantee salvation in this world. The mark of inability was the ultimate fear in a culture of anxiety.

Miracle 35 narrated the punishment of a man who had committed injustice against the oppressed, in this case a group of orphaned children of the offender's former professional partner.[69] An extended account of the circumstances of the case is not relevant for the purposes of the present discussion. In summary, Thecla communicated to Pappos, the offender, in an appearance that was comparable to a nightmare (κακὸν ὄναρ), the threat of a life-sentence, to be carried out after one week's time. Faced with such a condemnation, fear deformed Pappos' body physically and visibly. It turned him upside down (ὑπὸ τοῦ δέους κατακλονούμενος), as the text formulated. His body could not remain at rest (μηδὲν ἐν ἠρεμίᾳ μεῖναι τοῦ σώματος) and all limbs were filled with shaking, violent motion, and quivering (βρασμοῦ δὲ καὶ κλόνου καὶ τρόμου πάντα πληρωθῆναι τὰ μέλη). His eyes, which were already blind, restlessly moved left and right (τά τε ὄμματα ἤδη λειπαυγοῦντα περιεπλανᾶτο). His tongue hung down, his teeth chattered, his heart pulsated so hard that it seemed it might jump out of his body, and his legs moved shakily without support, as if they were walking on ground that had slipped

[69] *Life and Miracles of Thecla* (ed. and transl. Dagron) 384–387.

away and turned into liquid (πόδες δέ, ὡς ἐπὶ τινος χαύνου καὶ διαρρέοντος ἀναγκαζόμενοι βαίνειν, οὕτω συχνά τε καὶ ἀστήρικτα ὑπωλίσθαινον). This life-threatening contortion of his body moved Pappos to confess his injustice and perform at least one charitable act. Nevertheless, he died on the appointed and predicted date, as a confirmation of the truth of Thecla's omen.

For Pappos, deformity and discomfort punished his moral wrongs. His convulsions resulted from an extreme moral depravity. His injustice was against orphaned children, the most vulnerable members of society. A depraved moral act resulted for him in dramatic physical symptoms. In the perception of this account, "moral sickness" and "physical sickness" could be connected. Disability and deformity in this case came to be a source of the fear imposed upon Pappos, since he had not willingly subjected himself to fear before. Such fear would have led to concern for the well-being of those who most needed it. The manifestation of Pappos' inability to have fear took the form of a visible terminal illness. He had the chance to cure himself, and took the offer of repentance for his deed in hopes that he might be cured. The story showed that the healing of a person's soul was most important, and that it did not always manifest itself in physical healing.

5. Conclusions

Physical healing is one type of a broader therapeutic transformation. The evidence for this thesis in the preceding discussion came from texts of healing blindness. In places where ancient medicine was largely ineffective, the wider transformation, social and religious, was given prominence. This permitted for a polemic against claims of physical healing without a transformation of the self, a polemic that was integral to the healing process both at the sanctuary of Asklepios at Epidauros and at Thecla's shrine at Meriamlik near Seleucia. Moreover, that transformation included metaphors of gender and gender roles, as in the case of the healing of Pausikakos.

Asklepios had been a human who became immortal, a god who knew human suffering in all its forms, including death. The element of faith in the healing miracles of Epidauros was multi-faceted. It encompassed explanations for the failure to heal, namely lack of faith, shifting the burden from the priest-physicians to the sick individual; anyone who was sick, after all, had offended the gods. The element of faith, however, was also part of the wider transformative experience of healing, in which the individual who was not fully healed came to terms with his or her condition. The Epidaurian accounts suggested that the individual who sought the help of the

gods but who was not healed nevertheless deserved special consideration, a censure of the ancient hatred and fear of disability. Similar arguments were at work in the miracle accounts associated with Thecla, showing a universal typology of healing in the Mediterranean world that transcended the realm of religious practice and that transcended religious confession as well. Miraculous healing at both shrines served the needs of both pantheistic and monotheistic theologies.

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SILENT HISTORY?
SPEECH IMPAIRMENT IN ROMAN ANTIQUITY*

Christian Laes

1. Introduction

Historical research on speech impediments in Roman Antiquity is emblematic of the scholarly approach to impairment in general. In fact, the history of people with speech impairments is at a greater disadvantage, since few visible traces remain in artifacts. Aside from a few passing references, there is not a single scholarly study of the ancient Roman world that views people with speech defects from the socio-cultural point of view: the medical point of view has taken precedence.[1] In any case, there is no systematic collection of source material, from any of the ancient Roman historical periods, that references stammers or other speech impairments. In order to compile a list of source material that refers to impairments of speech and to make contextually relevant statements about the speech impediments, one must make use of sources from a very wide temporal scope. The present chapter includes material from the third century BCE of the Roman Republic to late antiquity (sixth century CE). One must also take into account earlier Greek literature: classical Greek literature was part and parcel of the cultural heritage of the Roman elite. Testimonies from the Hebrew and Christian scriptures are also important. The Greek orator Demosthenes, for example, was very much the

* I am particularly grateful to two persons who helped me find my way in sometimes very peculiar issues. Hagith Sivan (Kansas University) was of great help for the Jewish material concerning Moses. Doralice Fabiano (Genève) kindly supplied me with the unpublished text of a seminar *Voci di barbari e voci di animali in antica Grecia*. Her paper was in many ways useful for understanding the broader context of language and speech in Antiquity. Lynn Rose (Truman State University) kindly read a first version of this paper, and considerably improved it as to language and some arguments.

[1] Wollock (1997) is a very good exhaustive study of the medical material. Garland (1995) 97 makes some references. Gibson (2006) offers a first exploration of medical texts on speech therapy. Though more involved with Greek Antiquity, Rose (2003) 50–65 is the best socio-cultural treatment of speech impairment in Antiquity. Though excellent on the subject of voice in Antiquity, Bettini (2008a and b) does not elaborate on the subject of stuttering.

model for the Roman elite regarding difficulties in speech, and Moses's difficulty of speech appears in Roman writing. The lack of source material obliges the historian to acknowledge every scrap of evidence, no matter how temporally and geographically disparate, to assemble a broad picture. In addition, this collage is composed of material of very different genres, ranging from entertainment literature to miracle accounts to documentary evidence found in the inscriptions and papyri.

Using the model of the 'house of the history of mentalities' as developed by the French historian M. Vovelle, this chapter serves as a possible paradigm for approaching ancient disabilities *tout court*. On the level of the ground floor, I collect the evidence on persons with speech impediments. On the first floor, a systematic analysis of the Greek and Latin vocabulary to denote speech disfluency will be carried out. Several passages include ways of denoting the impairment that inform us about popular attitudes and ways of thinking about people who talked with broken speech. As the Vovellian upper floor is concerned with the intellectual discourse of theologians, philosophers, scientists, doctors and jurists, these items will be grouped under two separate headings: the legal dossier and the ancient medical theory. Throughout the chapter, the bodily reality of handicaps and disabilities is important. The question of what factors might cause which forms of speech disfluency in Antiquity is thus the first I will pose, for it is the foundation for building our 'house of mentalities'.

2. Causes of Speech Impairment: Then and Now

One can safely assume that similar speech disorders affected people in the ancient world as in the present day, with much the same causes being responsible. I do not include muteness caused by congenital hearing incapacity; the dossier of deaf-muteness in Antiquity has been dealt with in another recent publication.[2]

Stuttering has a biological basis that is likely to be neurological. It does not seem to be related to culture or language. In the twenty-first century, more than 687 million people worldwide or about one percent of the world population stutter, and there is no reason why this would have been significantly different in ancient society.[3] However, studies on the ethnology

[2] Laes (2011b).

[3] Rose (2003) 51. For most recent figures, see the Stuttering Foundation of America website [http://www.stutteringhelp.org/].

of speaking have pointed to the fact that chronic disfluency may take various forms which are more or less culturally defined.[4]

Anatomical factors may also cause speech disfluency. People with less significant cleft palates are known to have survived in Antiquity, at least when the cleft palate did not prevent them from suckling as infants. Obviously, their speech would not have been impeccable to say the least.[5] Other anatomical factors causing speech disfluency include motor problems caused by cerebral palsy, muscular dystrophy or spina bifida.[6] In modern speech therapy, anatomical disorders are discerned from developmental speech disorders, which might be related with developmental disability, or learning disorders, or disorders on the autism spectrum. Without speech therapy, such children might appear mute and incapable of delivering any speech.[7] Dental problems were part of everyday life in Antiquity and can cause some form of speech impediment. "Most people are without some tooth or other" say the *Digesta*, and the archaeological evidence has largely confirmed this picture.[8] Accidents, injuries and/or maltreatment, and physical violence may have affected speech in the past, just as they do today. Injuries of the tongue may provoke (permanent) speech defect:[9] Galen mentions a patient who accidentally bit off the fore part of his tongue during a convulsion: afterwards, he had problems of speaking.[10] Here the particular ancient (and medieval) punishment of extracting the tongue should be taken into

4 Wollock (1997) 176.

5 On cleft palates in Antiquity, see Garland (1995) 6–7; Grmek (1983) 111; Grmek, Gourevitch (1998) 234–235 (depiction in art); Roberts, Manchester (1995) (osteological evidence). See Galen, in Oribasius, *Liber incertus* 62, 47 (171 ed. Raeder; CMG VI: 2, 2) on defects of speech caused by mutilated lips. Celsus, *De Medicina* 7, 12, 6 explicitly mentions split lips hindering speech. Recently, Siebers (2010) 21–23; 141 has pointed to the modern perception of cleft palate as something that needs to be cured—an attitude that would not have existed in the ancient world.

6 Aristotle, *Historia Animalium* 587a describes the birth of babies who appear bloodless and dead, but who are revived by skilled midwives: cases of brain damage at birth or cerebral palsy? Osteological evidence of spina bifida: Grmek (1983) 110–112; Roberts, Manchester (1995).

7 Rose (2003) 52.

8 *Digesta* 21, 1, 11 (Paulus; early third century CE). On dental hygiene, abscesses and caries in Pompeii, see e.g. Laurence (2005) 90. On dental problems and treatment, see Cootjans, Gourevitch (1983); Cootjans (1991). See Pliny the Elder, *Naturalis Historia* 7, 70 and Lactantius, *De Opificio Dei* 10 on missing teeth or bad arrangement of teeth as a cause of speech defect. On teeth and toothless old age, see Parkin (2003) 82–83. See again *Digesta* 21, 1, 11 stating that no old person would be healthy, if we reckon missing a teeth as a disease. See also Lactantius, *De Opificio Dei* 10, 14: after loosing their teeth, old men stutter (*balbuttiunt*) as if they returned to their infancy.

9 Explicitly stated by Galen, *Commentarius Prorrhetikon* 1, 15 (16, 510 Kühn).

10 Galen, *De Morborum Differentiis* 8 (6, 864–866 Kühn).

account.[11] Traumatic experiences in war, both physical and psychological, or other casualties may deprive people of most of their speech for some or all of their lives.[12] Finally, speech disorders can be acquired by conditions associated with old age, such as Parkinson's disease, strokes, and senile dementia, as well as tooth loss and gum decay.[13]

3. Known Instances of Speech Impaired Persons in Antiquity

Compiling a list of all persons in Antiquity who are classified by the ancient authors as having displayed what modern terminology would deem to be speech impediment is a sobering experience. There are a mere fourteen instances, all of which appear in the Appendix to this chapter. Too often, scholars have presupposed facts about these instances which simply do not exist. Demosthenes (who appears as n. 8 in the Appendix) is undoubtedly the most striking example of this superimposition of modern assumptions onto ancient texts. This icon for people in the modern world who work to overcome the speech impairment of stuttering was at best suffering from a weak voice and a lisp. His early success in court makes it quite unlikely that he was a stutterer, for a significant stutter surely would have been mentioned, and the famous tale about his practice of speaking over the noise of the ocean waves is not actually mentioned as such by Quintilian, our main Roman source for the life of Demosthenes.

Further, the ancient sources are unclear in terminology. Undoubtable 'medical' instances of speech impairment—coming close to what we would label as chronic stuttering or stammering—only seem to appear with Battus (n. 2) (who attended an oracle to obtain healing), Pindarus (n. 3) (with whom the mention of lack of dignity in speaking and the tongue-tied condition leads us to suppose a serious problem), Metellus (n. 10) (whose difficulty in

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11 Levine (1991) on Prudentius, *Peristephanon* 10 about the martyr Romanus of Antioch who, stripped of his tongue, performed the ultimate rhetorical accomplishment of defeating the pagan Greco-Roman rhetorical culture. Carotenuto (2002–2003) on the miracle of Romanus' talking disembodied tongue (a Syriac addition to the lost original Greek). See also Galen, *De Morborum Differentiis* 8 (6, 864–866 Kühn) on amputated tongue.

12 A case of hysterical-traumatical blindness is mentioned in Herodotus, *Historiae* 6, 117 (the Athenian Epizelos being blinded after battle without having suffered any wound). See also Pliny the Elder, *Naturalis Historia* 28, 17, 62 on the "elective mutism" of Maecenas Melissus who enjoined silence on himself for three years in consequence of spitting blood after a convulsive fit.

13 On strokes, see Karenberg, Hort (1998). On dementia, see Parkin (2003) 228–235; 252.

preparing a dedicatory speech reminds us of the now famous King's Speech by the British king George VI), Vitellius' unfortunate son (n. 13) and the Emperor Claudius (n. 12). As to Moses (n. 1), his legendary speech problem can be read in anachronistic medical terms, but a metaphorical reading is also possible.

Not surprisingly, because our sources are imbued in Greco-Roman rhetorical culture, nearly all of the fourteen instances concern difficulties with public speaking. There are no stories about stuttering persons' speech in any other context. Vitellius' son is mentioned as a striking example of monstrous progeny, but Suetonius was not interested at all in how the boy carried on with his life. We do not even know whether or not he survived childhood (n. 12). The case of young Titus Manlius gives us a glimpse of parental shame and embarrassment over the speech problems of a young son: the boy was sent away to the countryside (n. 11). In the age before microphones, simply attracting a crowd's attention would have required strength of voice, along with an imposing physical appearance and an assumption of a potential audience's expectations. The inability to perform as an orator, much more than what we would call a speech impediment, was the initial obstacle not only for Demosthenes (n. 8), but also for Plato (n. 5), Charmides (n. 6) and Isocrates (n. 7). Plato and Isocrates became very successful teachers after overcoming their obstacles to performance. Moreover, even a significant speech impediment—beyond a weak voice or timidity—did not necessarily imply failure in the public forum. Emperor Claudius (n. 12) has been portrayed as a successful speaker on some occasions, Metellus' impairment (n. 10) was no obstacle to his priestly offices and magisterial duties, and Titus Manlius turned became a hero of the Roman Republic (n. 9). As to Bambalio (n. 11) and Regulus (n. 14), *bêtes noires* of, respectively, Cicero and Pliny the Younger, it is impossible to know whether their *haesitantia linguae* refers to an actual impairment rather than to a motif for their dislike of their eloquent political opponents.

The difficulty of tracing down speech impaired people is even more apparent in the epigraphic and papyrological sources. Although personal names came to be associated informally with speech impairment, it makes no sense to search in the epigraphic databases for common names as Battaros/Battaras in Greek, or Balbus and Blaesus in Latin. Due to the hereditary nature of these names, they actually tell us nothing about their bearers in regard to characteristics of speech,[14] though there might be a

[14] See Masson (1970) for the Greek dossier of names.

slight chance of one speech-impaired diviner in Hispania.[15] Nor do the papyri offer many clues. Apparently, difficulty in speech was not often used as an identifying characteristic, while other physical markers were commonly used to establish a person's identity in the papyri.[16] Still, there are some traces. A private letter to a certain Ammon indicates that the letter has been given to Ammon, who is named as τῷ τραυλῷ (the lisper). A third century runaway slave named Philippos is identified as a fourteen-year-old with light complexion, a broad nose and "speaking badly" or possibly stammering (ψελλόν).[17]

4. The Ancient Vocabulary on Speech Impairment

With the examination of words which were in use to denote speech impairment, we move to the first floor of the Vovelian house.

A broad range of Greek and Latin vocabulary denoted speech difficulty: τραυλός, τραυλίζειν, βάττος / βατταρίζειν, ψελλός / ψελλίζειν, μογίλαλος, ἰσχνόφωνος and λεπτόφωνος; *atypus, balbus* / *balbut*(*t*)*ire*, *blaesus*, *titubare*, *haesitare lingua*, *elinguis*. None of these words denote a medical condition exclusively. Instead they refer to a broad range of phenomena from peculiarities of speech to what we would label as speech impairment. It usually requires a deep context, which is usually absent, to determine what really was the matter with a person concerned. Medical writers by and then bother to define more sharply (cf. *infra*), and ancient lexicographers may be of help too.

Taking a look at the instances of possibly speech impaired persons listed in the appendix, it seems as ἰσχνόφωνος was the most common Greek word to denote stuttering. However, this term inherently exhibits an ambiguity, referring both to a "thin" or "weak" voice (ἰσχνός) and an actual speech

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[15] *CIL* II 5078: *L*(*ucius*) *Valerius L*(*uci*) *l*(*ibertus*) / *Auctus* / *avium inspex* / *blaesus a*(*nnorum*) / *LVI s*(*it*) *t*(*ibi*) *t*(*erra*) *l*(*evis*) / *Felicio frat*(*ri?*). It seems that this inscription from Asturca (Hispania citerior) was erected for the 56-year-old freedman and diviner/reader of birds Lucius Valerius Auctus by his brother Felicio. However, all the recent epigraphical editions tend to interpret Blaesus as an additional cognomen of the diviner. It would indeed be strange that a default of speech would be mentioned on the grave inscription of a priest (though this is the interpretation suggested in ThLL).

[16] For lists on personal markers in papyri, see Cernuschi (2010). Even deaf and/or mute persons by and then appear in the papyri. See Laes (2011b) 469–470.

[17] *PSI* 3, 220 (3th century CE) Amon; *P. Oxy*. 51, 3616 (3th century CE) runaway slave. In *P. Fay*. 110 line 21 (94 CE) appears the name Psellos. Consequently, also Psellos in *P. Fay*. 119 (103 CE) has been understood by the editors as a name, though it is not impossible that Σαβῖνος ὁ Ψελλὸς ὁ ἀπὸ Ψινάχεος should be translated as Sabinos the stutterer, of Psinachis.

impediment. Τραυλίζειν is mostly connected with mispronouncing letters or lisping; the much rarer βατταρίζειν may be used as a synonym.[18] Since the Greek historian Acesander defines βατταρίζειν as "to refrain the tongue", making a connection with the word ἰσχνόφωνος, it seems very reasonable to suppose that the threesome τραυλίζειν, βατταρίζειν and ἰσχνόφωνος now and then referred to stuttering.[19] Though ψελλός ψελλίζειν is sometimes defined as malpronunciation of the letter *sigma*, it is also used to denote the whole gamut of faltering speech.[20] Μογίλαλος invariably seems to denote speech impediment as a medical condition, but the word is very rarely used.[21]

Latin lexicographers have mostly associated *balbut(t)ire* with these Greek verbs, again leaving a great deal of ambiguity about the exact application. Hence, the word may also refer to speaking slowly, improperly or hesitatingly.[22] *Blaesus* is by and then defined as broken speech, but also as a synonym of τραυλός, indicating malpronunciation of one letter.[23] Tellingly, most of these terms are also associated with childish language and the first stammering words of infants.[24] In this way, stammering is even mentioned as a typical phase of the human life course.[25] Also, these words are used in

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18 Diogenianus, in *Corpus Paroemiographorum Graecorum* 3, 68.

19 Acesander, in *FGrHist* 3b, 469f, fragment 6. See also *Etymologicum Magnum* (ed. Gaisford) p. 191 line 22–35 defining βατταρίζειν as not talking plainly and not making distinct use of the tongue, but speaking carelessly and with wrong accent—again making the connection with ἰσχνόφωνος.

20 Hesychius, *Lexicon* s.v. ψελλός. ὁ τὸ σίγμα παχύτερον λέγων. See note 22 for other use of the term.

21 Only in LXX *Isaias* 35, 6; Vulgata *Marcus* 7, 32 (Jesus' healing miracle, see appendix n. 15). More medicalised, though not specified: Vettius Valens p. 73, line 12 (ed. Kroll); Ptolemaeus, *Tetrabiblos* 150; Aetius, *Tetrabiblos* 8, 38 (ed. Aldina). On the latter use, linking μογολαλία with paralysis of the vocal instruments, see Wollock (1997) 177.

22 Definitions of *balbut(t)ire* include *balbuttire est cum quadam linguae haesitatione et confusione trepidare* (Nonius Marcellus, *De Compendiosa Doctrina* 80 (ed. Lindsay)). *balbuttit qui tarde loquitur* (*Glossarii Latini* 5, 492, 29); *male loqui et incongrue* (*Glossarii Latini* 5, 9, 11). The verb is equated with τραυλίζειν (*Glossarii Latini* 2, 458, 17), and with ψελλίζειν (*Glossarii Latini* 2, 480, 14). See also Fronto, *Ad M. Antoninum de Orationibus liber* 8 (156 van den Hout) *impediti voce dicuntur, qui balbuttiunt, et contrarium est soluta et expedita voce*.

23 Broken speech: Isidorus, *Origines* 10, 29 (*inde* (*a balando* vel *balbando*) *et blaesus, quia verba frangit*); *Glossarii Latini* 5, 172, 7 (*blesus, balbus, id est impeditioris et tardioris linguae*). Malpronunciation of one letter: *Glossarii Latini* 2, 570, 13 (*blessus una littera peccans loquendo*); 4, 211, 27 (*qui alio sono corrumpit litteras*), cf. *Priapeia* 7, 2. Equated with τραυλός in *Glossarii Latini* 2, 30, 35; 2, 30, 46 and 2, 458, 18.

24 On children's language and the human life course, see Golden (1995) and Laes (2011) 81–83.

25 Explicitly associated with child language, τραυλός/τραυλίζειν: Aristophanes, *Nubes* 862 and 1381; Aristotle, *Historia Animalium* 536b8; *Problemata* 902b22. βάττος/βατταρίζειν:

connection with animal language (often the sounds of swallows or other birds) and foreign languages, putting the barbarian's speech at the level of the incomprehensible.[26] In the same context, the terms occur in connection with speaking improperly or talking nonsense, or with the lack of oratorical skills.[27] Also improper speech linked with drunkenness or fear of public speaking are mentioned in this context.[28]

We are thus left with the sobering conclusion that there is no ancient word, Greek or Latin, which as a technical term, denotes what we would label as speech impairment.

Pseudo-Zonaras, *Lexicon* bèta (p. 371 ed. Tittmann); Elias Philosophus, *In Porphyrii Isagogen et Aristotelis categorias commentaria*, p. 78 line 23 (ed. Busse): ἣ γὰρ ταῖς ἡλικίαις παραμετρεῖται, ὡς τὸ βατταρίζειν, καὶ γενειάσκειν καὶ ἡβάσκειν; Porphyrius, fragment 11, line 35 (ed. Nauck). ψελλός / ψελλίζειν: Aristotle, *Historia Animalium* 492b32; Soranus, *Gynaecia* 1, 109 (baby-talk of a nurse). *Balbutire*: Lactantius, *De Opificio Dei* 10, 14; Jerome, *Epistula* 108, 26. See also Philostratus, *Vitae Sophistarum* 574: after a nice speech, Herodes Atticus offered special presents to Alexander of Seleucia, among which there were two lisping children, since Alexander liked the sound of such young voices (δύο δὲ ἐκ Κολύτου παιδία ψελλιζόμενα, ἐπειδὴ ἤκουεν αὐτὸν χαίροντα νέαις φώναις).

26 Explicitly associated with animal language or foreign tongues, τραυλός / τραυλίζειν: *Anthologia Graeca* 10, 4 (birds). βάττος / βατταρίζειν Eustathius, *Commentarii ad Homeri Odysseum* 2, 265 (swallow); Lucian, *Iuppiter tragoedus* 27 (foreign tongue); Strabo, *Geographica* 14, 2 (foreign tongue). ἰσχνόφωνος: Antigonus, *Historiarum mirabilium collectio* 6, 1 (birds). λεπτόφωνος: Aristotle, *Historia Animalium* 538b13 (animal language). *Balbutire*: Pliny the Elder, *Naturalis Historia* 10, 80 (birds). *Elinguis*: Apuleius, *Apologia* 8, 19; *De Deo Socratis* 4, 33 (birds). *Blaesus*: Ovid, *Amores* 2, 6, 24 (parrot). On speech of animals and speech of foreigners, see Van Hal (2009); Bettini (2010 a and b). See also Philostratus, *Vitae Sophistarum* 490: Herodes Atticus and Favorinus of Arles enjoyed the company of Autolekythos, an Indian slave, whom they kept as a pet child. At drinking parties, they enjoyed his funny Attic speech mixed with Indian (maybe like an Indian speaking English today?): ἐγκαταμιγνὺς Ἰνδικοῖς Ἀττικὰ καὶ πεπλημένῃ τῇ γλώττῃ βαρβαρίζων.

27 βάττος / βατταρίζειν: Lucian, *Iuppiter tragoedus* 27; Phrynichus, *Praeparatio sophistica* [cf. Hipponax, fragment 108 (Degani)] p. 54 line 5 (de Borries). ἰσχνόφωνος: see the tradition on Moses possible speech impediment or just his lack of eloquence (appendix n. 1). ψελλίζειν is used for Empedocles' indistinct philosophical discourse: Aristotle, *Metaphysica* 985 a5. *Balbutire* for uttering philosophical nonsense: Cicero, *Tusculanae Disputationes* 5, 75; *De divinatione* 1, 5; for the lack of oratorial skills: Fronto, *Ad M. Antoninum de eloquentia liber* 4, 1 (146 van den Hout); *Ad M. Antoninum de orationibus liber* 8 (156 van den Hout). *Elinguis* for bad oratory: Livy, *Ab Urbe Condita* 10, 19; Tacitus, *Dialogus de Oratoribus* 36; Fronto, *Ad Verum Imperatorem* 2, 9 (123 van den Hout). *Titubare* and bad oratory: Cicero, *Ad Herennium* 2, 8.

28 *Titubare* for drunkeness: Seneca, *Epistulae Morales* 95, 14; Macrobius, *Saturnalia* 7, 6; for fear of public speaking: Seneca, *Epistulae Morales* 11, 4. *Blaesus* and *titubare* in the context of intoxicated persons: Ovid, *Ars Amatoria* 1, 598; Juvenal, *Satirae* 15, 48.

5. Roman Law on Speech Impairments

Generally speaking, Roman legislation is only concerned with the problem of being deaf and/ or mute, not with those living with speech impairment.

First, we may ask whether difficulty in speaking would hinder the acceptance or the exercion of citizenship. Indeed, public declaration of one's name and properties for the census, as well as the uttering of a oath were the first actions which marked integration as *civis* in Roman civil society. However, since the official formula for convocation of citizens included the possibility that one should be represented by a procurator, it seems unlikely that stuttering or any other speech impediment would be considered a real obstacle.[29] Deaf-mute people were generally excluded from office holding,[30] though they were not exempted from the obligatory liturgies or *munera* which they needed to fulfill in their *municipia*. Neither were they entitled to take up guardianship, to act as judges, to make a legal will, or to act as witnesses of wills. Roman law seems to have granted deaf-mutes the right to contract a marriage, as well as the right of manumitting slaves, be it in an informal way. Deaf people (and by extension people who were perceived as deaf-mute) were not allowed to take any legal action with the praetor. In the name of humanity, however, these groups could be granted a lawyer by the praetor or by another person to act in their place, even if they did not find a defender by themselves. Probably, neither children nor deaf people were allowed to take legal action in favour of another person. These restrictions were related to the incapacity of making oneself clear before courts and judges, since written actions were not considered sufficient.[31]

Now such incapacity could also occur with those who were in a significant way speech-impaired. Certainly in cases of severe impediment, it is not unlikely that they were equalled with what we would call completely non-verbals. On the other side, there is no such thing as a formal interdiction for holding office in the case of stuttering: the case of Caecilius Metellus (n. 10) indeed proves quite the opposite. Moreover, praetors who before court had to pronounce certain formulas as *do, dico, addico*—malpronunciation of which could lead to annulation of the proces—could appeal to *praecones*

[29] Varro, *De lingua Latina* 6, 86. See Allély (2004) 122.

[30] See also Valerius Maximus, *Facta et dicta memorabilia* 6, 9, 1: *hebetis atque obtunsi cordis* (…) *et domesticis et rei publicae usibus inutilis videbatur*.

[31] For the whole dossier on deaf-muteness in Roman law, see Küster (1991) and Laes (2011b) 463–465, where all the relevant legal passages concerning *surdi et muti* are cited.

who in a way lend their voice to the magistrates concerned.[32] Only in the case of Vestal Virgins, speech impairment is together with corporal disabilities, explicitly mentioned as excluding candidates.[33] Thus Justinian legislation, dating from the year 531, but referring to a legal tradition which goes back for centuries, takes into account the possibility that deafness and/or muteness might occur a considerable period after birth, such as in the case of an illness. In the following passage, speech disorders due to injury or stroke might be included:

> Ubi autem et in huiusmodi vitiis non naturalis sive masculo sive feminae accedit calamitas, sed morbus postea superveniens et vocem abstulit et aures conclusit, si ponamus huiusmodi personam litteras scientem, omnia, quae priori interdiximus, haec ei sua manu scribenti permittimus.
>
> If, however, such defect of either male or female is not inborn but an intervening sickness takes away the voice and closes the ears, then, assuming that such persons know how to write, he or she may by his or her own hand, write a will, which we have just forbidden to be made.
>
> *Codex Justinianus* 6, 22, 10, 1 (transl. F.H. Blume)

The following passage probably also refers to cases of speech impairment, where *lingua praepedita* leaves some doubt about the precise ability of uttering some words.

> Sin vero aures quidem apertae sint et vocem recipientes, lingua autem penitus praepedita, licet a veteribus auctoribus saepius de hoc variatum est, attamen si et hunc peritum litterarum esse proponamus, nihil prohibet et eum scribentem omnia facere, sive naturaliter sive per interventum morbi huiusmodi infortunium ei accessit.
>
> If a person's ears are open, and he is able to hear but ability to speak does not exist, in such case, though opinion among the ancients differed, there is nothing, if we assume that he is versed in letters, that hinders him from doing everything in writing, whether he is born with this misfortune or it came upon him through in intervening sickness.
>
> *Codex Justinianus* 6, 22, 10, 5 (translation F.H. Blume)

Speech impediment also occurs in discussions by Roman legal authors on the difference between *vitium* and *morbus* (cf. the Gellius passage in the introduction of this volume, p. 7).

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[32] Allély (2004) 124. Gourevitch (1984) 148 has rightly pointed to the fact that there was no formal objection to magistrates suffering from a disability, though of coures disability and infirmity could be used now and then to blame a political opponent or to exclude him from holding office.

[33] Gellius, *Noctes Atticae* 1, 12, 1–3: *item quae lingua debili sensuve aurium deminuta aliave qua corporis labe insignita sit*. See Allély (2004) 126–128 on priests and impairment.

> Quaesitum est, an balbus et blaesus et atypus isque qui tardius loquitur et varus et vatius sanus sit: et opinor eos sanos esse.
>
> It has been asked whether a stammerer, one who lisps or speaks inarticulately, or very slowly, or who is knock-kneed or bow-legged is sound, and I think that he is. *Digesta* 21, 1, 10, 5 (Ulpian) (translation S.P. Scott)

Referrring to a passage in Labeo, Gellius remarks

> "Balbus autem," inquit "et atypus vitiosi magis quam morbosi sunt, et equus mordax aut calcitro vitiosus, non morbosus est."
>
> "But," he continues, "one who stutters or stammers is defective rather than diseased, and a horse which bites or kicks has faults rather than a disease."
> Gellius, *Noctes Atticae* 4, 2, 5 (translation J.C. Rolfe)

It is important to understand these passages in the proper way: what counted was the slave's ability to work. The issue was of particular important in the case of sales and possible recompensation, when the slave turned out not to be suited for 'normal use'. As such, Roman law considered being as a serious impediment to the slave's performance. Speaking with difficulty was not reckoned as such:[34]

> Mutum morbosum esse Sabinus ait: morbum enim esse sine voce esse apparet. Sed qui graviter loquitur, morbosus non est, nec qui ἀσαφῶς: plane qui ἀσημῶς loquitur, hic utique morbosus est.
>
> Sabinus says that a dumb person is diseased, for it is evident that to be deprived of speech is a disease. A person who speaks with difficulty, however, is not diseased, any more than one is whom it is hard to understand; and it is clear that one whose words are without any meaning is diseased.
> *Digesta* 21, 1, 9 (Ulpian) (translation S.P. Scott)

6. Medical Aetiology and Terminology

The inconsistent use of terminology in the literary sources does not imply that ancient writers never distinguished between varieties of speech difficulties. In any era, human begins might stutter or stammer under the stress of public speaking, in the case of clumsily approaching a love interest for the first time, or in childhood, experimenting with speech. In order to become familiar with ancient awareness of the range of speech problems, we need to take a closer look at scientific and medical classifications.

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34 See Allély (2004) 131–132.

There are at least two passages which exhibit the existence of precise distinctions. First, between the lines, the pseudo-Aristotelian *Problemata* (11, 30) gives, in the style and on the authority of Aristotle, clear-cut definitions for three speech defects.

> Why are more children *isch[n]ophonoi* than adults? Is it because, just as they are less steady with their feet and hands while still in childhood, and those who are even smaller cannot walk at all: so children have very little command of their tongues: and if perfectly small cannot talk at all, but are like brute creatures, because they have no control; which will be the case not only in *i[scw ijscnovfwno* but also in *trauloi* and *pselloi*. Now *traulotes* is the inability to control a certain letter, not just any at all, but a particular one. *Psellotes* however is to leave out either a letter or a syllable. *Isch[n]ophonia* is when someone is unable promptly to join one syllable to another. But all of these occur from lack of power: and the tongue is unable to minister to the mind. The same thing is also seen in drunkards and the aged, but to a lesser degree.
> Pseudo-Aristotle, *Problemata* 11, 30, 902b16–30 (trans. Wollock)

The authorship of the *Problemata* is debated, and the collection as we know it might have received its form only in the fourth or fifth century CE. However, the material is Aristotelian in character and closely related to statements in the rest of the Aristotelian corpus. From the definitions quoted above, the term *isch[n]ophonia* (I will return later on the correct reading without the letter *nu*) comes closest to stuttering as a speech pathology, while *psellotes* and *traulotes* refer to peculiarities of speech, not clinical diagnoses.[35]

This definition is supported with the description of speech defects in the works of Galen. *Traulismos* is a fault of speech, not of voice, consisting of the inability to pronounce the combination of the letters *tr*.[36] Galen's definition of *psellismos* is the inability to pronounce the letter *sigma*—again a peculiarity of speech, but not a chronic lisp.[37] The *tachyglossos*, or quick-tongued, is probably similar to the modern category of cluttering, a speech disfluency similar to stuttering.[38] In the same vein, *isch[n]ophonia* refers to the better

[35] Wollock (1997) 54–58 on the text of the Problemata and its important afterlife. See also Wollock (1997) 63 on Aristotle, *De audibilibus* 804b27–40 describing as *isch[n]ophonos* the one who utters the same sound for a long time, not being able to make the next one. *Problemata* 10, 40 again defines *isch[n]ophonia* as the inability to express oneself fluently.

[36] Galen, *Hippocratis aphorismi et Galeni in eos commentarii* 6, 32 (18, 1, 51 Kühn). See Wollock (1997) 191–194.

[37] The definition is in Galen's commentary on Hippocrates, *Epidemiae* 2, 6, 22. Galen's text survives in Arabic. For a corroboration of the definition, see Hesychius, *Lexicon* s.v. ψελλός. ὁ τὸ σίγμα παχύτερον λέγων. See Wollock (1997) 194–195.

[38] Galen, *Hippocratis Epidemiorum liber I et Galeni in eum commentarius* 2, 6 (17, 1, 93–95 Kühn). See Wollock (1997) 229; 280; 289–290 on *tachyglossia* as cluttering.

known speech defect, stuttering. With this term, a particular problem arises. Greek lexica only mention the words ἰσχνοφωνίᾳ ἰσχνόφωνος, which points to a "thin" or "weak" voice (ἰσχνός) rather than to a clinical speech impediment. The standard Greek lexicon, the Liddell-Scott-Jones, indicates as a second meaning: "having an impediment in one's speech (connected by the Greeks with i[scw)". In the Hippocratic tradition one finds traces of the original meaning of ijscnovfwno" as thin or weak-voiced. In his commentary on the Hippocratic work *Epidemics*, Galen, who was very aware of distinctions in terminology and possible confusions caused by improper use of terms, points to this Hippocratic use of the word:

> And first, the *ischnophonos*. Accordingly, if it was so written, the *ischnous tèn phonèn* [thin of voice] are meant. For certainly today there are still some of these *ischnophonoi*, such as are also said to be *leptophonoi*. Therefore, although both names mean the same thing, they [i.e. the *leptophonoi*] nevertheless differ from the *ischnophonoi*, as we have shown in our book *On the Voice*, where we have demonstrated that *leptophonoi* occur on account of narrowness of the trachea and the larynx; and that *ischnophonoi*, however, occur on account natural disfigurement of the muscles with move the larynx. Both of these, however, come about from a weakness of native heat in the "first confirmation".
>
> Galen, *In Hippocratis librum primum epidemiarum commentarii* 3, 78 (17, 1, 186 Kühn); transl. Wollock

After a long and convincing philological analysis of all the instances with ἰσχνοφωνία in Galen, including those based on the Arabic translation tradition, Wollock came to the conclusion that Galen mostly used the term ἰσχοφωνία. With this word, Greek physicians referred to the "checked" voice. In the manuscript tradition of the Galenic texts, the term disappeared by conflation with the better known ἰσχνοφωνία; the earliest surviving conflation of the terms appears as early as the Herodotean histories (see Appendix n. 2). The term ἰσχνοφωνία survived only in the scholarly Greek dictionaries, thereby negating Galen's theory on checked voice, which Wollock refers to as entitled "Galen's lost theory".[39] An illustration of Wollock's thesis appears in a Galenic fragment which only survived in the Hellenistic medical writings of Oribasius:

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[39] Wollock (1997) 153–187. See p. 169 on an editorial note by the translator Hunain ibn Ishaq (Baghdad, 809–873): "And we find places written differently in the manuscripts: in some it is written *ischuphunus*, and the reference is to one whose voice is difficult and impeded; and in some it is written *ischnuphunus*, and the reference is to those whose voice is thin. And one whose voice is thin differs from one whose voice is difficult and impeded." See for this Arabic note: E. Werkebach, F. Pfaff, *Galenus. In Hippocratis Epidemiarum Libri I and II. Edited and translated* (CMG v: 10, 1) (Leipzig, Berlin, 1934) p. 94.

> Thus, most who are *ischophonoi* [*emendavit Wollock*] experience this impediment mainly when they wish to emit a loud voice. Indeed, a loud voice is produced, as we demonstrated above, when one strongly expresses the air and the laryngeal muscles are also strongly exposed to its expulsion. Therefore when the air is suddenly borne upwards, but the muscles are too weak, it begins by falling upon the outer orifices, and blocks the central passages by dilating the ventricles.
>
> For this reason such [i.e. *ischophonoi*] after having spoken for an instant in beginning and having enunciated the value of almost one single syllable, then lose their voice; with some there nevertheless remains a small sound similar to those who are whispering. For those whose voice is arrested in this way, it is impossible to speak before having evacuated the air from the ventricles; now this could not be done unless they should cease contracting the chest.
>
> Galen, in Oribasius, *Liber incertus* 62, 30–32
> (169 ed. Raeder; CMG VI: 2, 2 (trans. Wollock)

At the same time, the symptoms described here by Galen do not correspond to the most common forms of stuttering as categorized by speech pathologists in the modern world. Wollock has identified the condition of Galen's *ischophonia* with spastic dysphonia or laryngeal stuttering (stuttering with the vocal chords), a rare condition that is noticeable only in people who use their voices daily in a professional capacity.[40]

The ancient medical authors compiled an extended aetiology of malarticulation. Of the large number of pseudo-Aristotelian *Problemata* on sound and voice, nineteen are at least loosely linked with difficult speech.[41] The tongue was considered the chief instrument of speech: as "messenger of the Logos", as Euripides described it, reporting the thought of the mind, it was governed by instruments receiving nerves from the brain.[42] Two points stand out in this aetiology.

First, diseases that injured speech were explained by humoural theory. Excessive moistures, it was believed, soften both the nerves and the muscles of the tongue: loss of control and malarticulation are the consequences. Correspondingly, people with the speech difficulty of producing sibilants (τραυλοί) were prone to diarrhea.[43] In line with the Hippocratic tradition,

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40 Wollock (1997) 171–176.

41 See the list in Wollock (1997) 52.

42 Messenger of the Logos, see Euripides, *Supplices* 203–204. Connection with the brain, see Galen, *De Usu Partium* 16, 3 (4, 272–278 Kühn). See Wollock (1997) 23–24 on the wide ranging tradition about the primacy of the tongue for human Logos.

43 Galen, *In Hippocratis Aphorismos* 6, 32 (18, 1, 51 Kühn).

excessive moisture of bile in people who were grouped within the categories of τραυλοί and ἰσχνόφωνοι were susceptible to extreme melancholy.[44] Dryness, a secondary symptom of fevers and other maldies, dries the brain, nerves, and tongue.[45] Excess of heat or cold can also afflict brains, nerves, or the tongue and cause such people to be afflicted by either stupor or violent, quick movements.[46]

Secondly, nine different aetiologies are brought forward to explain speech defects related to what ancient physicians called compound instruments. Each instrument was built of similar parts. The list below exhibits an example of each disease (wherever possible, a reference to Galen is quoted; if Galen is not mentioned for a particular aetiology, this indicates the lack of mention surviving in his work). As the table makes clear, no particular speech impairment is singled out; rather, attention is paid to peculiarities of speech and voice.[47]

I. Diseases of conformation

1. improper shape, disfigurement of the natural form

bad conformation of the tongue muscles	τραυλοί Galen, *Commentarii in Hippocratis Epidemias* 1, 2, 78 (17, 1, 187 Kühn)
congenital malformation of certain muscles in the larynx	ἰσχοφωνία Galen, *De Morborum Differentiis* 6 (6, 857 Kühn)

2. improper capacity of any pore, tube, or concavity

nasal passage blocked by violent blow	Galen, *De Morborum Differentiis* 6 (6, 861 Kühn)

II. Diseases of number

1. similar parts are present which should be absent

parts in excess are of the same kind as those which occur naturally (e.g. polyps obstructing the nasal passage)	Galen, *De locis affectis* 4, 9 (8, 272 Kühn)

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44 Hippocrates, *Epidemiae* 2, 5, 2; 2, 6, 3. This theory on advanced melancholy is also preserved in two fragments by Rufus of Ephesus, frag. 70 (p. 356, 11–12 ed. Daremberg & Ruelle) and frag. 127 (p. 456, ed. Daremberg & Ruelle). See Wollock (1997) 274–291 for the very extended tradition of speech and melancholy in medical theory before 1300.

45 Hippocrates, *Epidemiae* 7, 43.

46 Galen, *De sanitate tuenda* 6, 2 (6, 390 Kühn).

47 The following follows the detailed treatment by Wollock (1997) 103–108.

parts in excess are not of the same kind as those which occur naturally (e.g. all sorts of worms, cysts, cataracts, abscesses caused by strange material as nails, hairs, …)	Galen, *De Methodo Medendi* 14, 12 (10, 984–986, Kühn)
2. similar parts are absent which should be present	
parts are absent partially, by mutilation (a patient accidentally bit off the fore part of the tongue during a convulsion; mutilation of the nose and lips).	Galen, *De Morborum Differentiis* 6 (6, 864 Kühn)
III. Diseases of magnitude	
1. an organ is too large	
congenitally enlarged tongue, obstructing speech	Galen, *De Morborum Differentiis* 6 (6, 868 Kühn); *De Methodo Medendi* 14, 8 (10, 971 Kühn)
2. an organ is too small	
shortness of tongue as a cause of malarticulation	Galen, *De Morborum Differentiis* 6 (6, 868 Kühn); *Commentarii in Aphorismos* 6, 32 (18, 1, 51, Kühn)
IV. Diseases of arrangement	
1. improper position of the organs	
bad placement of teeth	Pliny the Elder, *Naturalis Historia* 7, 70; Lactantius, *De Opificio Dei* 10
2. improper agreement or preternatural conjunction of adjacent parts	
immoderate band of the tongue, by which the tongue is much disturbed in speaking and chewing	Galen, *De Usu Partium* 11, 10 (3, 884 Kühn); Oribasius, *Collectiones Medicae* 45, 16 (169–170, Raeder) [CMG vi: 2, 1][48]
V. Solution of continuity	
1. a similar part is not completely torn, but only is some measure (e.g. split lips hindering speech)	Celsus, *De Medicina* 7, 12, 6

[48] The Oribasius text has the earliest attestation for the Greek word ἀγκυλόγλωσσος. Later usage includes medical authors as Aëtius (sixth century) and Paulus of Aegina (seventh century).

7. Speech Therapy

The same type of confusion occurs between imperfect sounds produced by the orator and imperfections resulting from the bodily or mentally constitution of the speaker. Examples appear in the passages below, in which ancient authors emphasise the possibility of improvement in speaking.

> Is there any doubt that many, although so born as to have some things impaired against nature, were restored and set right by Nature when she had revoked herself, or by the art of medicine? As the sort whose tongues were so tied that they could not speak were freed after it had been cut with a scalpel. Many have also cured a vice of nature through meditation and exercise, as Phalareus writes that Demosthenes, although he could not pronounce *rho*, brought it about through exercise that he could pronounce it very clearly.
>
> Cicero, *De Divinatione* 2, 46 (transl. Wollock)

In other words: one is capable of overcoming vices of nature (both imperfections of pronounciation and speech impairment) as long as one tries hard enough. For such courageous persons, Demosthenes is of course the example to be imitated.[49]

Occasionally, ancient Graeco-Roman physicians acknowledge instances of children growing out of their stuttering stage when they reach a certain age, but in their descriptions, they refer to childish prattle, not to speech pathology.[50] With the exception of the Emperor Claudius, the only known pathological instance in our collection of a child who stutters is Emperor Vitellius' unnamed son (n. 13 in the Appendix). We do not even know how or whether the boy survived. In any case, there is no mention of speech therapy whatsoever. A passage in the works of Celsus suggests that the loosening of the tongue by surgery was often performed, though not always with good result. We may presume that children were usually the objects of such operations, though Celsus does not explicitly say so.[51] As to the remedies suggested by Quintilian, which include "tongue-twister" exercises and the use of actors

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49 Wollock (1997) 42–43 on this topos on overcoming impairment by hard work—the idea survived well into the Middle Ages and the Early Modern era. See the references on Demosthenes, n. 8 in the appendix. John Chrysostom, *Homiliae in Matthaeum* 17, 7 (PG 57, 263).

50 Pseudo-Aristotle, *Problemata* 11, 27, 902a5–15; 11, 30, 902b16–30.

51 And indeed many people, once the wound has healed, have spoken; I am, however, familiar with a case when, though the tongue had been undercut so that it could be protruded well beyond the teeth, the power of speech did not follow. So it is, as Celsus writes in the Art of Medicine, that even where there is a rule as to what ought to be done, there is no rule as to what result ensues (Celsus, *De medicina* 7, 12, 4 transl. W.G. Spencer).

to train children (since acting was very much connected with singing and vociferation, voice gymnastics was undoubtedly involved), it is obvious that such exercises were primarily meant to improve the imperfect speech of all children in the process of training them to be fully-fledged Roman orators.[52]

The connection between eloquence and music in Antiquity is underestimated. Ancient rhetoricians knew that the distinction between oratory and music was simply one of degree. This might have had an impact on people who stuttered, who perform better if they concentrate on singing their "stumbling block" words, as we learn from their memoirs. In the extant record, there is no mention of this phenomenon by ancient physicians,[53] with one possible and very important exception, a fragment in the Galenic corpus.

Yet, one fragment of Galen's treatise *De voce* (On the Voice) survived in the Medical Collection, an epitome written in the years 361–363 by the Greek court-physician Oribasius (325–403). Here, we are confronted with was seems to be a real life recording of an ancient speech therapist dealing with his patient:

> Thus a certain rhetor of my country, who was quite *ischophonos*, wished very much to be cured. It being noticed by me, therefore, that he chiefly experienced the difficulty when he began to produce speech, but that, as soon as he had once succeeded in speaking, were it no more than a single word, he continued his discourse admirably, I advised him to contract the chest moderately when he began to speak, in order to push the tension, if later he should so desire, to the highest degree. The rhetor answered me that in this I gave him excellent advice, since it happened above all when he was addressing a crowd, whe he was pleading (a case), or when he exerted himself, that he experienced this impediment; whereas when relaxed he began easily, and spoke with a completely normal voice.
>
> Galen, in Oribasius, *Liber incertus* 62, 33–34 (169–170 Raeder) [CMG vi: 2, 2] (trans. Wollock)

As mentioned above, Wollock has identified the condition of this patient of Galen with spastic dysphonia or laryngeal stuttering (stuttering with the vocal chords). This rare condition becomes very real when it affects one's class identity and daily occupations.[54]

52 Quintilian, *Institutio oratoria* 1, 1, 37 (tongue-twisters); 1, 11, 1–8 (actors). See Wollock (1997) 45.

53 Oratory and music: Dionysius of Halicarnassus, *De compositione verborum* 11. See Wollock (1997) xxix and Habinek (2005).

54 Wollock (1997) 171–176.

Seemingly unique by its richness of detail, this testimony is still outranged by another fragment which most likely brings us very near an physician treating 'real' stutterers.

> By all means, people should be encouraged to speak. If they do not succeed in doing so, in the cases that their tongue totally refuses to perform, they should be persuaded to conceive the words they are not able to utter in their minds. For it often happens that the air, which is formed in the depth of the lungs, begins moving and turns out to utter the words which were formed in the minds of those wanting to speak up. In any case, they should be taught to at least take care of the uttering of the first letter: by careful practice with themselves they should learn to utter that letter plainly. It is best to do so with vocals, so that the speech organ is not closed or restricted by the difficulty of the sound of various letters. If they succeed in doing so, we will proceed with giving them nouns and proper names which are formed with many vocals, like "paean" and the like. In the same way, we will give them numbers and we will provoke our patients (*aegrotantes*) to shout them out. Next, we will offer them the exercice of recitation and disputation.
>
> Caelius Aurelianus, *Tardarum passionum* 2, 41 (568–569 ed. Bendz)

Here, there is no mention of the profession of the people who were being treated, though this fragment suggests that they could be any men, not only rhetoricians, who were significantly hampered by their difficulty speaking (and wealthy enough to afford a physician's treatment). Unfortunately, we know nothing more about the number or the profile of Caelius Aurelianus' clients, nor do we know his intended audience. A fifth-century Numidian physician, he was deeply influenced by the works of the second-century Soranus of Ephesus, who also emphasized method. Caelius Aurelianus' methods, with their emphasis on taking a deep breath, the importance of shouting, beginning a sentence with vocals and simple (one-syllable) words and ending with spontaneous conversation, come very close to modern therapeutic programs to teach fluency and longer syllable duration.[55]

8. The Emperor's Speech: Claudius as a Paradigmatic Stutterer

Emperor Claudius has too often been the subject of retrospective analysis in all areas, including the area of speech pathology. In these attempts at diagnosis, the very same problems arise as mentioned by Lutz Alexander Graumann in this volume. In a straightforward biographical approach, often

[55] Gibson (2006).

coloured by Robert Graves's novels, ancient historians and historians of medicine have done their best to diagnose the "emperor with the shaking head". The modern medical consensus is that Claudius exhibited symptoms of Little's disease also known dystonia, congenital or caused by cerebral lesion at birth. Such a disease is not apprent at birth, but later causes motor problems, clinical spasticity and muscle weakness, slowness in speech, and the appearance of low intellect.[56] Pertinent here is the information on Claudius' speech patterns, which can be gleaned from the information in Suetonius and from the satirical description in Seneca's *Apocolocyntosis*. Neither of these writers was interested in the history of medicine; we must therefore study how the description of the emperor's irregular speech plays its part in the depiction of his personality in Suetonius' biographical account and in Seneca's political satire.[57]

In the *Apocolocyntosis*, the disturbed voice of the emperor functions as a physiognomical marker along with other parts of the body: a foul voice indicated a foul character. When Claudius arrives on Olympus, a messenger of the gods comments upon the deceased's sturdy build and white hair, clear signs of strong authority.[58] The first impressions, however, are wrong, to a comic effect. The newcomer wagged his head and was limping.[59] Moreover, when asked from where he came, he "made some kind of response with a confused sound and unintelligible speech". The messenger could not understand a word of it: "(he) was not Greek, nor Roman, not of any known race (*nec ullius gentis notae*)". When the strange newcomer was sent to Hercules, the latter determined that he was barely human, not even a land-creature. Later, a frustrated Hercules asks Claudius: "what utterance are you making now in this confused speech? What homeland, what race (*quae patria, quae gens*) brought forth this wagging head?"[60] Seneca further

[56] Gourevitch (1998) 468–470 mentions Little disease; Valente, Talbert, Hallett, Mackowiak (2002) elaborate on dystonia. The latter article rests on assumptions about Claudius' health which are not found in the ancient texts at all. For an update on the theories on Claudius' disease, see Fassolini (2006) 41–44. The straightforward biographical approach also appears in Levick (1990) 13–14. Osgood (2011) takes a different stance towards the matter, refraining from any medical diagnosis.

[57] Braund, James (1998); Osgood (2006–2007) are of crucial importance for a right evaluation of the matter. Recently, Gladhill (2012) has convincingly showed how Suetonius' physiognomical descriptions of the emperors of the Julio-Claudian dynasty want to emphasise a 'degenerative pattern'.

[58] Seneca, *Apocolocyntosis* 5, 2. On Claudius' handsome first appearance, see also Suetonius, *Claudius* 30.

[59] Seneca, *Apocolocyntosis* 5, 2. See also Suetonius, *Claudius* 30.

[60] Seneca, *Apocolocyntosis* 5, 2 (unintelligible; not Greek or Roman); 5, 3 (not even a

degrades Claudius by putting in his mouth his last words on earth, following a loud fart, "O no! I think I have shat all over myself", emphasizing his inability to control his body and his voice.[61] When Claudius speaks on Olympus, the narrator remarks: "This is what he was thought to say, as far as he could be understood". Finally, Seneca has the deified Augustus make fun of the newcomer, who is about to become a god, by stating bluntly: "In short, let him say three words in quick succession and I will be his slave".[62] Seneca's story is blatant invective, and it was meant to strike a chord, so to be effective, the allegations against Claudius must have been familiar to the audience. A variety of evidence suggests Claudius' exclusion from public life in childhood and youth. Antonia the Younger considered her child "a monster of a man (*portentum hominis*), not finished by Mother Nature but only half-done (*tantum incohatum*)" and if she would accuse somebody of dullness, she used to say that he was even more stupid than her son Claudius. His grandmother Livia treated him with the utmost contempt and only admonished him through brief, harsh notes or messengers. His sister Livilla is said to have prayed openly and loudly that the Roman people might be spared of the undeserved fortune of having him as an emperor. Only his great-uncle, the Emperor Augustus, recommended in a letter to work out a consistent strategy as to take into account his physical and mental capacity. At that time, young Claudius had turned twenty-two, and the imperial family had to consider his possible public appearance and office holding. Before that, he attended the gladiatorial games that he and his brother gave in honour of their father covered in a cloak, and his taking of the gown of manhood had been secretly celebrated around midnight without the usual ceremony. An extract from another letter by Augustus expresses the emperor's surprise at Claudius' success in declaiming: "I do not see how anyone who talks so unclearly can when he declaims say what needs to be said clearly".[63]

For whatever reasons, Claudius' political career started very late. Augustus made him an augur, a position that had lost the political influence that used to accompany divinatory prowess, and he only entered the Senate during the reign of Tiberius (14–37/38), who gave Claudius the emblems of the consulship only, but did not allow him the *cursus honorum*. There is no

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land creature); 7, 2 (frustrated Hercules). Throughout this paragraph, I quote translations by Osgood.

[61] Seneca, *Apocolocyntosis* 4, 3.

[62] Seneca, *Apocolocyntosis* 7, 3 (to be understood); 11, 3 (speaking three words).

[63] Suetonius, *Claudius* 3 (mother and Livilla mocking him); 4 (Augustus' letters); 2, 2 (cloak and ceremony at night).

ancient source that tells us that Tiberius referred to Claudius' feebleness or difficulty in speech in connection with this public office. On the contrary, we are told that the Roman knight chose Claudius two times as theis spokesman with the consuls.[64] Only in the year 38, at age 48, did he hold the position of consul together with Emperor Caligula for a period of two months.[65] While Claudius' image of soundness and health improved after he became an emperor (upon Caligula's assassination in 41), public memory of his problems never died. Hence Tacitus attributes to Claudius some success in public speaking, though he was censured outright and had to prepare his words carefully (*quotiens meditata dissereret*). In everyday conversation, he often made a fool of himself by the wagging of the head and his stuttering (*titubantia linguae*).[66]

The biographical account of Suetonius, the history of Tacitus, and the Senecan satire all need to be understood within the context of the importance of the ancient orator's voice. Command of one's voice was fundamental to eloquence. Oratory required strenuous voice training; the voice influenced the audience's perception of a speaker. In the world of the Roman aristocracy, achievement in oratory was as glorious as success on the battlefield.[67] Suetonius' biographies and other literary source material reflect this value, and make clear that the emperor's quality of voice was of great importance. Through his voice, the public comes to know their emperor, and Suetonius draws on physiognomy to help him describe the Roman rulers.[68] Seneca, in his *Apocolocyntosis*, allows us to see the image of an ideal emperor through derision. Claudius is in all ways the opposite the ideal: his *vox confusa*, inarticulate speech, puts him on the level of a non-human animal, or even a *monstrum*.[69] Claudius, in Seneca's portrayal, was in every way impotent to command Rome: even the freedmen in his imperial service looked down on him.[70] Finally, the portrait of Claudius in the *Apocolocyntosis* is that

64 Suetonius, *Claudius* 5–6.

65 Suetonius, *Claudius* 7.

66 Suetonius, *Claudius* 31 (improving health); Tacitus, *Annales* 13, 3 (oratorical success); Suetonius, *Claudius* 30 (stuttering and wagging).

67 Osgood (2006–2007) 331–335.

68 Osgood (2006–2007) 335–337 offers many examples of Suetonius' interest in the emperors' voices. See also Pliny, *Panegyricus* 4, 4: through words and gestures an emperor rules the land and seas.

69 Osgood (2006–2007) 338 on Claudius as a monster. For *vox confusa* in *Apocolocyntosis* 5, 3 Osgood refers to the grammarian Diomedes, *Ars* 2, 1 (Grammatici Latini 1, p. 420 (ed. Keil): *confusa est inrationalis vel inscriptilis, simplici vocis sono animalium effecta, quae scribi non potest, ut est equi hinnitus, tauri mugitus*).

70 Seneca, *Apocolocyntosis* 6, 2.

of the angry man, a man who utterly lacks self-control. This again puts him on the level of a beast. Seneca writes that Claudius "was able to kill people as effortlessly as a dog squats on his haunches".[71] In Seneca's dialogue *De Ira*, written about a decade before his *De Clementia*, anger is a special problem when it resides in the soul of the ruler. The prose piece *De Clementia*, instructional in style, was presented to the Emperor Nero in about 55, when Seneca's role shifted from Nero's personal tutor to political advisor. The *Apocolocyntosis*, which cannot be dated with any certainty, also may have been intended for the Emperor Nero. In any case, all of Seneca's works show how an emperor's speech revealed his imperial identity within the imperial ideal.[72]

9. Conclusion

What has become of ancient stutterers? First, in summary, it is difficult to compile a list of historical instances of people experiencing speech dysfluency. Only a handful of people can be identified with any certainty as stutterers: the authors who record them invariably mention them in broad categories along with slow speakers and clumsy orators. Even the paradigmatic stutterer Demosthenes, whose very name has come to stand for stuttering, cannot be labelled this specifically when one reads the ancient sources in context. As for the paradigmatic Roman stammerer, the main appearance of Claudius' stammering is in a hostile pamphlet, in which Seneca eagerly depicts Claudius as a counter-example of how the ideal emperor should present himself.

Second, Greek and Latin vocabulary to denote speech impairment is notably vague and includes a wide range of phenomena, from temporary events such as drunkenness and bouts of shyness and embarrassment. Lisping, along with other peculiarities in pronunciation, was not discerned sharply in the ancient vocabulary from stuttering.

Third, Roman laws, which survive in late compilations such as the *Justinian Digest*, emphasized the importance of making oneself clear in court, and hardly mentioned difficult speech *per se*, except in the case of people categorized as mute, a state which could result from significant speech dysfluency as well as other conditions.

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71 Seneca, *Apocolocyntosis* 10, 3.

72 The link with Seneca's *De Ira* was first suggested by Braund, James (1998) and further elaborated by Osgood (2006–2007).

The relative absence of stutterers is the most striking in ancient works on scientific theory and medicine. For philosophical reasons—the Logos was the feature *par excellence* of the rational human being—ancient physicians focused intently on the human voice. Medical treatises include an abundance of subtle categorisations of speech problems. Stuttering, however, is never emphasized; instead, it is mentioned alongside other unpleasantries such as speaking through the nose or lisping. In the rare case when Galen turns to speech therapy as we would recognize it today, he seems to be describing laryngeal stuttering, a rare condition which, in his own words, only affected his client when speaking in public, presumably over a sustained time, not in his everyday life. Of all the extant medical writing, only the fifth-century Numidian physician Caelius Aurelianus has left an intriguing glimpse of what could be described as speech therapy. Barring the unlikely event of substantial archaeological discoveries, there is no way to know more about the context or the intended audience of his writings.

Now, how is this relative silence on stuttering, which is today considered a major speech pathology, to be explained? It would be arrogant and incorrect to presume that the ancients "did not know better", or that they failed to see the aetiology or implications of speech impediment. The elaborate medical observations on the human voice show quite the contrary. Instead, I argue that the absence of stutterers in the historical record is a result of the social context and the cultural assumptions which have coloured the ancient source material. The vast majority of our source material is heavily biased socially. We only hear about the small minority of the urban well-to-do in a literary culture, in which speech, language and reason were closely intertwined. Not being able to speak properly in public, for whatever reason, meant the inability to become a fully fledged aristocratic gentleman. Little did it matter whether this incapacity was caused by shyness, a weak voice or innate speech impairment: what mattered were exercise and the will to overcome impediment. Also, the preoccupation with rhetoric, which characterises the ancient sources, obscures the everyday reality of what comprised the vast majority of speech impaired people in Antiquity. Indeed, the reality of a stuttering child in a land worker's family in a village, or that of an artisan's apprentice in a larger town might have been quite different from that of the well-to-do man, for whom the ineligibility in political and intellectual arenas would have been a hardship that is inevitably overemphasised in our surviving source material.[73]

[73] Rose (1997) 36.

Appendix: Instances of Speech Impaired Persons in Antiquity

In order to keep this list to a reasonable length, I only note persons who might reasonably have experienced such speech impediments as stuttering or stammering.

1. Moses (ca. thirteenth century BCE): In the Septuagint, Moses, standing in front of the burning bush, responded: "I am not eloquent … but I am slow of speech and of a slow tongue" (LXX *Exodus* 4, 10: οὐχ ἱκανός εἰμι … ἰσχνόφωνος καὶ βραδύγλωσσος ἐγώ εἰμι; Vulgata *Exodus* 4, 10: *non sum eloquens … impeditioris et tardioris linguae sum*). He also famously told the Lord that due to his feeble speech he was unable to speak to Pharaoh on behalf of the Jews (LXX *Exodus* 6, 30: ἰσχνόφωνός εἰμι). Here, however, the Vulgate offers a slightly different version: "Behold, I am of uncircumcised lips and how shall Pharaoh hearken unto me?" (Vulgata *Exodus* 6, 30: *en incircumcisus labiis sum*). According to Haggadic-rabbinic commentaries, Moses at age three had taken the crown from Pharaoh's head and placed it on its own. The King's counsellors and the princes were upset and decided to put the little boy to the test. Two bowls were set in front of him on a plate: a golden bowl and a sizzling coal. If Moses were to take the gold, he would be killed for his greediness. When the bowls were set, Moses reached for the gold but the angel Gabriel directed him to the coal. The little boy put the coal in his mouth, burned his tongue and became a stutterer (*Ex. R.* 1, 31). Jewish literature on Moses' stuttering is vast and extensive, counting over a hundred articles, many of which are written in Hebrew. For the sake of the present study, the reader is best served by the survey of Jacobs et al. (1901–1906) in the Jewish Encyclopaedia, as well as the well-documented article by Tigay (1978), who states that the Jewish tradition indeed leads one to believe that Moses suffered from an articulatory or speech defect, while the vagueness of the terminology does not permit more precise medical conclusions. Some have focused on stuttering: see Attanasio (1997) and Cicurel and Shvarts (2003). The Christian tradition runs counter to the Jewish one. Several commentators from Philo to early Greek and Latin patristic writers have removed Moses' difficulty from the realm of pathology, pointing to his being ineloquent in the face of God because of overwhelming joy or by violent grief, unskilled in debating or claiming to have forgotten his Egyptian (Philo, *Quis rerum divinarum heres sit* 4 and 16; *De vita Mosis* 1, 83; Clemens of Alexandria, *Stromata* 4, 17, 106 and Cyprian, *Epistula ad Fortunatum de Exhortatione Martyrii* 10 [PL 4, 664]).

The Septuagint and Vulgate passages have been repeated and alluded to again and again by later patristic writers up to the medieval period and into the Byzantine era (e.g. Gregory of Nyssa, *Encomium in xl martyres i* [PG 46, 756]; Athanasius, *Dialogi contra Macedonianos* [PG 28, 1316]; John Chrysostom, *In Matthaeum Homilia* 56 [PG 58, 551]). These authors state that the passages in question did not refer to a speech impediment, but only to Moses's humble acknowledgment of the impossibility of rendering the Lord's words into human speech. Origin even devoted a whole sermon to this allegorical interpretation of Moses' feeble speech: Origines, *Homilia iii in Exodum* [PG 12, 310–317]. See also Eusebius, *Commentarii in Psalmum* 85 [PG 23, 1029]; Basilius Seleuca, *Sermo* 28 [PG 85, 317]; Basilius of Caesarea, *Enarratio in prophetam Isaiam* 6, 186 and Georgius Pisida, *Hexaemeron* 1874–1875 [PG 92, 1576–1577]. In any case, the Latin *incircumcisus labiis* was often understood in a allegorical way, as explicitly stated by Origenes (Rufinus, *Origenis homiliae in heptateuchon* (*praeter deuteronomium*) *Latine versae, homilia in Genesim* 3, 5 p. 46, line 11 (ed. Baehrens): *quod incircumcisus sit lingua, qui nondum cessavit ab stultiloquio*). See ThLL s.v. 2., referring to expressions as *incircumcisa mens* (LXX *Leviticus* 26, 41), *incircumcisae aures* (LXX *Ieremias* 6, 10) and *incircumcisi cordibus et auribus* (Vulgata *Acta Apostolorum* 7, 51).

2. Battus (seventh century BCE): the founder of Cyrene, over which he allegedly reigned from 632 to 599 BCE. Herodotus tells us that he was born in Thera, as the fruit of the union between Polymmnestes, a chief of Thera and Phronima, a princess from Crete. He made the pilgrimage to the Delphic oracle because of his speech impediment (ἰσχνόφωνος καὶ τραυλός). Instead of curing him, the Pythia answered that Apollo ordered him to found a colony in Libya. Stating that Battos was the Libyan word for king, Herodotus digresses about the origin of the name Battus and whether or not it actually referred to a speech disorder. The Pythia, we are told, responded with typical oracular ambiguity and poetic flair: "Battos, thou camest to ask thy voice; but Phoebus Apollo bids thee establish a city in Libya". Puzzled by the oracle, Battus led a band of Theraeans to Libya, where, as legend has it, he established the city of Cyrene. After this, Herodotus says nothing more about Battus' speech: to him, the main point clearly lay in the Pythian pun (see Herodotus, *Historiae* 4, 155–159). For Plutarch, however, the story is an illustration that even though his ἰσχνόφωνος and τραυλός was incurable, Battus could still be an excellent leader and founder of a powerful city (*De Pythiae Oraculis* 405b). According to Pausanias (*Periegesis* 10, 15, 6–7) Battus' voice was healed spontaneously when the sight of a lion terrified him. Pausanias' wording

about Battus' voice, "coming into being" (τῆς φωνῆς γενέσθαι), and his crying out in a clear and loud voice when seeing the lion (βοῆσαι σαφὲς καὶ μέγα ἠνάγκασεν) have led some later scholars such as Justin to conclude that Battus had been not just speech-impaired, but mute. Justin tells us that Battus' father attended the oracle out of shame for his adolescent son who did not speak yet (*propter dedecus adulescentis filii nondum loquentis*). Also in Justin's version of the story, the tongue-tied Battus (*propter linguae obligationem*) first began to speak well (*linguae nodis solutis*) when the Theraeans arrived in Africa. Because of this event, his people were encouraged to find a place to build their new city. See Justin, *Epitome Philippicarum Pompeii Trogi* 13, 7. Later lexicographers assumed a correlation between the Greek word for stammer βάττος and the personal name Battus, on the logic that stutterers would have been named after the famous king. See, for example, Pseudo-Zonaras s.v. βάττος (p. 379 ed. Tittmann); Hesychius bèta 346 (ed. Latte) and Suda bèta 185, line 15 (ed. Adler); Etymologicon Magnum s.v. βάττος (p. 191 line 14 ed. Gaisford). Some linguists believe that the term βάττος came first, and that the king (originally named Aristoteles)[74] took the name rather than gave it; for further discussion, see Wollock (1997) 155–159; Rose (2003) 55 and Masson (1976).

3. Pindar (522 to after 446). It is explained in the scholia, explanatory notes written by later (Byzantine) scholars in the margins of Hellenistic texts on early Greek poets, that Pindar was not able to lead the choirs himself. He had a weak voice and was therefore unable to address his choirs in public (διὰ τὸν αὐτὸν ἰσχνόφωνον εἶναι καὶ μὴ δύνασθαι ἐν τῷ δημοσίῳ δι' ἑαυτοῦ καταλέγειν τοῖς χοροῖς). The man he used in his place, we are told, was named Aeneas. Pindar's speech difficulty is mentioned explicitly in the scholia as a disadvantage, since most other poets with apt voices (μεγαλόφωνοι) would lead their choirs themselves. See *Scholia in Pindarum* (*scholia vetera*) (ed. Drachmann) Ode O6, scholion 148a, line 4 and Ode O6, scholion 149a, line 2. Another scholion suggests that Pindar was not able to address his choirs with dignity: *Scholia recentiora in Pindari Epinicia vol. 1* (ed. Abel) Ode-treatise O6, scholion-section 149, line 4 (καὶ μὴ δύνασθαι λέγειν ἀξίως). According to the historian

[74] On the original name Aristoteles, see Pindar's, *Ode Pythica* 5, 87; Callimachus, *Hymnus in Apollinem* 76; Heraclides Lembus, *Excerpta Politiarum* 16; Jerome, Chronicon Eusebii p. 151 (*Theraei Cyrenen condiderunt, oraculo sic iubente, et conditor urbis Battus, cujus proprium nomen Aristaeus*). According to Justin, *Epitome Philippicarum Pompeii Trogi* 13, 7 the original name was Aristaeus. In this context, Wollock (1997) 155 mentions the later (i.e., not ancient) tradition of the philosopher Aristotle having a lisp.

Acesander (third or second century BCE), Pindar was not congenitally weak of voice, but his tongue suddenly became bound (ἀπὸ ταὐτομάτου δεηθῆναι τὴν γλῶτταν). See *Fragmenta Historicorum Graecorum Fragmenta historicum Graecorum* 3b, 469f, fragment 6 and *Scholia in Pindarum* (*scholia vetera*) (ed. Drachmann) Ode P4, scholion inscr b, line 22.

4. Alcibiades (450–404). Information on his imperfect speech is rather specific. He was said to change "r" for "l" and was therefore mocked in Aristophanes, *Vespae* 44–45. Aristophanes refers to this lisp as τραυλιάσας. Alcibiades' lisp, however, was considered so charming that his son even tried to imitate it (Plutarch, *Alcibiades* 1, 4). Plutarch characterizes Alcibiades' speech as persuasive and full of charm (Plutarch, *Alcibiades* 1, 4). Demosthenes also praised his oratorical skill (Demosthenes, *Oratio* 21, 145). See Rose (2003) 56 and Vickers (1989).

5. Plato (427–347). According to Diogenes Laertius, Timotheus the Athenian mentioned the young Plato's weakness of voice (ἰσχνόφωνος). Tellingly, this mention is connected with a young swan that appeared in a dream of Socrates. The cygnet flew away after uttering a loud, sweet note (κλάγξαντα). The next day, Plato was introduced as a pupil to Socrates (Diogenes Laertius, *Vita Philosophorum* 3, 5). Plato's elegance of speech and graceful eloquence were praised though late Antiquity: *Anthologia Graeca* 9, 18; Valerius Maximus, *Facta et dicta memorabilia* 1, 6; Olympiodorus of Thebes, *Vita Platonis*: Appendix, p. 1, lines 14–20 (ed. Westermann). See Wollock (1997) 160.

6. Charmides (fifth century, d. 403): According to some scholia, Socrates' pupil Charmides was nicknamed "the bat" because he was dark-skinned, wasp-like and weak of voice (ἰσχνόφωνον). Again, we see the connection between speech imperfections and the shrieks of a bird-like creature, in this case, the bat. See *Scholia in Aristophanem. Scholia in Nubes* (*scholia vetera*) (ed. Holwerda) verse 104 line 2 and *Scholia in Aristophanem. Scholia in Nubes* (*scholia anonyma recentiora*) (ed. Koster) verse 104c, line 2. Another tradition, explained also by his dark skin and frailty of voice (ἰσχνόφωνος), gives him the nickname of box-wood (see *Scholia in Aristophanem. Commentarium in Nubes* (*scholia recentiora Tzetzae*) (ed. Holwerda) verse 104a, line 5). Tellingly, boxwood (*Buxus semperviren*) is, according to infomational page of the website for the European Boxwood and Topiary Society "a very plain, quiet shrub with an elusive fragrance and comforting familiarity. It is unsurpassed in its ability to be smoothly topiarised into

firm shapes, neat hedges or baroque flourishes" [www.ebts.org] (accessed 13 February 2012).

7. **Isocrates (436–338).** The famous Athenian rhetorician repeatedly states that a thin voice and a lack of assurance prevented him from entering upon a public career. He therefore became the leader of a school that taught the skills of rhetoic. Again, we are not informed about the nature of this weakness of voice. See Isocrates *Epistulae* 1, 9; *Epistulae* 8, 7 (οὔτε γὰρ φωνὴν ἔσχον ἱκανὴν οὔτε τόλμαν); *Oration* 5, 81 (nature placing him at a disadvantage for a public career); *Oratio* 12, 10 (ἐνδεὴς … φωνῆς ἱκανῆς καὶ τόλμης). In Roman times, his biographers took over the tradition of Isocrates' being weak of voice, lacking confidence and being deprived of his father's goods. See Pseudo-Plutarch, *Vita decem oratorum* 837a (ἰσχνόφωνος τ' ὢν καὶ εὐλαβὴς τὸν τρόπον καὶ τὰ πατρῷα ἀποβεβληκώς) and Philostratus, *Vita Sophistarum* 505 (ἐλλιπὲς τοῦ φθέγματος—"lacking in sound").

8. **Demosthenes (385–322).** Though the famous Athenian orator is today emblematic of a person overcoming the hardships associated with speech disability, the information in the ancient sources is not as accurate as we would like it to be. In fact, his biographer Plutarch does not give one single clue that could identify Demosthenes as a stutterer. Deprived of his father at age seven and left with a considerable inheritance (part of which was stolen by his guardians) he was a child of weak health. In these conditions, he was not given the education a child of his class would normally have received (*Demosthenes* 4, 3–4). His first speech before an Athenian court as a young man at about age twenty was actually quite successful: he won the cause, but did not manage to recuperate the money his tutors had stolen from him (*Demosthenes* 6, 1). This successful experience urged him to try to address the public assembly. His first public appearance was a failure: he was mocked for his somewhat strange language, his periodically confused phrases and far-fetched arguments (*Demosthenes* 6, 3). Moreover he delivered his speech with "a certain weakness of voice and indistinctness of speech and shortness of breath" (*Demosthenes* 6, 4). Stunned by his failure, he ran to Piraeus where he met the wise old Thracian Eunomus, who praised his speech, comparing it to that of Pericles, but he reproached Demosthenes' cowardliness, neglect of body and nonchalance—factors which kept him from presenting himself to the Athenian audience in the proper way (*Demosthenes* 6, 5). Demosthenes' encounter with the actor Satyrus persuaded him even more of the necessity of taking exercise. The actor asked Demosthenes to quote some lines by Euripides or Sophocles, but then repeated them so skilfully and appropriately

to the character of the play that the verses seemed to be totally different to Demosthenes. After this, the young orator had an underground chamber built in which he descended for his daily exercises in acting and the cultivation of his voice: sometimes, Plutarch tells us, he would stay there for two or three months with half of his head shaven so that he would not to be tempted to break his training by enjoying social contacts (*Demosthenes* 7). On authority of Demetrius of Phaleron, Plutarch also mentions how Demosthenes improved his lisp and weakness of voice (τὴν μὲν γὰρ ἀσαφείαν καὶ τραυλότητα τῆς γλώττης) by holding pebbles in his mouth while practicing declamation. Also, he trained his voice by reciting speeches or verses while running up hills without taking breath (*Demosthenes* 11, 1). Cicero suggests that Demosthenes' speech impediment was connected to the habit of lisping. He mentions Demosthenes as a person who is hampered in speech (*cum ita balbus esset*) in that he could not pronounce the first letter of the art he studied, namely rhetoric. The famous story of the improvement of his declamatory style and shortness of breath by holding pebbles in his mouth is repeated in the same Ciceronian passage (Cicero, *De Oratore* 1, 260). Another Ciceronian text clearly links Demosthenes' problem with the difficulty of pronouncing the letter rho (Cicero, *De Divinatione* 2, 46). As for the famous image of the twentieth-century collective imagination, the ancient sources never state that Demosthenes strolled the beaches, shouting over the noise of the waves; Quintilian only mentions his studying on the seashore in order to get accustomed to the noise in courtrooms (*Institutiones Oratoriae* 10, 3, 30). The notion of going to the beach for pleasure is not ancient, Not a single contemporary writer associated Demosthenes' nickname Batalus, which was given to him as a child by other children (Plutarch, *Demosthenes* 4, 5), with Battus the stutterer (Aeschines, *Contra Timarchum* 126, 131, 164). According to Plutarch, who was fond of such etymologies, the nickname was either related to an effeminate flute player, to a licentious poet or, as Plutarch so modestly tells us, "to that part of the body which is indecent to name" (i.e., the anus, thus "asshole") (*Demosthenes* 4, 7). His other nickname, Argas, was related to his wild and nasty character (*argas* being a sort of serpent), or to his shocking way of speaking (*Demosthenes* 4, 8). See Holst (1926) and Cicurel and Shvarts (2003) (marred with some errors of interpretation) and Rose (2003) 56–57.

9. Lucius Manlius Torquatus (fourth century BCE). As an adolescent (*filium iuvenem, iuvenis*) he suffered from mistreatment by his father Manlius Imperiosus, the misconduct happening some years before his father's appointment to dictatorship in 363 BCE. He himself began his political carreer in 361, when

he was appointed to the position of military tribune. Speech impediment, or at least some inability to speak properly (*quia infacundior sit et lingua impromptus*) was the cause of his earlier banishment, far away from the city of Rome, in a slaves' environment in the countryside, amid simple folk and cattle. Like many other rural dwellers throughout human history, Manlius was associated with people who were slow to learn (*tarditatem ingenii*). The way he treated his son was viewed as symptomatic of his lack of respect towards fellow-citizens, friends, and close family (see Livy, *Ab Urbe Condita* 7, 4, 2–7). After all, his son, whatever his faults, was appointed tribune, which in this time before the Gracchi was not an entrance into the *cursus honorum*, but was a government role nontheless. In any case, public opinion was not favorable regarding Manlius Imperiosus' behaviour toward his son, and he was consequently put on trial. Despite his childhood banishment, the young Titus Manlius was not pleased with the idea of his father being subjected to trial. He made his way to the house of the tribune Marcus Pomponius, threatened him with a knife and forced him to swear never to hold a council of the plebs for the purpose of accusing his father. According to Livy, writing four centuries later and from an imperial perspective, this hostile act might have resulted from the youth's deprivation of education by long seclusion in the countryside (*consilium rudis quidem atque agrestis animi et quamquam non civilis exempli tamen pietate laudabile*). There is no sign of any impediment, in speech or otherwise, however, when Livy narrates that Titus Manlius addressed the porter, received and returned the salutations of his host, then threatened the unfortunate tribune. Moreover, after his heroic deed of filial piety, the people of Rome did not hesitate to elect him to a military tribune, a position which had great importance during this time of the expansion of the Latin League (see Livy, *Ab Urbe Condita* 7, 5, 1–9). Titus Manlius later became one of the heroes of Republican Rome: three times a consul (in the years 347, 344 and 340 BCE) and three times a dictator (in 353, 349 and 320 BCE). His best known feat dates from ca. 360 BCE when, with the full approval of the dictator Titus Quinctius Poenus, he took up the challenge of fighting a giant Gaul. He decapitated his enemy and put the fallen Gaul's *torques* around his own neck, from which he gained his cognomen Torquatus (Livy, *Ab Urbe Condita* 7, 10). As consul in 340 BCE, Titus Manlius Torquatus had his own son sentenced to death for insubordination when he engaged in a duel in the name of Rome without the permission of his father. In other words, the reckless young man did exactly the opposite as his father had, twenty years earlier, when he fought justly against the giant Gaul on behalf of Rome. The harsh sentence imposed by Manlius Torquatus on his son was in keeping with the pious behaviour he had shown towards his own father. The act of

sentencing his own son was a deed of both *pietas* and *iustitia*: as a bearer of *imperium*, he made a point of putting the state's interests before familial ties or personal feelings (Livy, *Ab Urbe Condita* 8, 7).[75]

10. Lucius Caecilius Metellus (third or second century BCE). This pontifex, consul and holder of the triumph had some sort of tongue-tied condition. He prepared for several months when he was charged with speaking out the words for a temple's dedication, (*adeo inexplanatae* s.c. linguae *fuisse accipimus ut multis mensibus tortus credatur dum meditatur in dedicanda aede Opi Opiferae dicere*). See Pliny the Elder, *Naturalis Historia* 11, 174. Traditionally, the tongue-tied pontifex Metellus is identified with Lucius Caecilius Metellus Dalmaticus, consul in 119, holder of the triumph in 117 and pontifex maximus from 114 to 103. An alternate identification, however, has been proposed by Morgan (1973): that of Lucius Caecilius Metellus, who was consul in 251 and 247, dictator in 224, pontifex and pontifex maximus since 243 until his death in 221. He vowed a temple to Ops Opifera before he fought the Carthaginians at Panormus in 250, and financed it with the spoils of his victory. The building of the temple started in 250 (the year of his triumph); the dedication took place in on the nineteenth of December in the year 247. In the year 241, he saved the Palladium from the burning temple of Vesta: during this rescue, he was possibly blinded, hence his name (Caecilius, from caecus, blind) (Cicero, *Pro Scauro* 48).

11. Marcus Fulvius Bambalio (first century BCE). The wealthy father of Fulvia. Fulvia was married first to the tribune Clodius Scribonius Curio, and upon his death in 49, she was married to the triumvir Marc Anthony. Fulvia became notorious for her active role in Marc Anthony's proscriptions, thus she, and by association her father, became a favourite object of political invective and negative judgement from Marc Anthony's opponents. In his third Philippic, Cicero calls Fulvia's father "a man of no account at all". In fact, he goes on, nothing could be lower than this man, as evidenced by his surname Bambalio, from his hesitation in speech and his denseness in understanding (*propter haesitantiam linguae stuporemque cordis*). See Cicero, *Philippicae* 3, 16.

12. Emperor Claudius (10 BCE–54 CE). Claudius' dossier, compiled from many sources, ranging from dubious to reliable, is the only extended file which

[75] Feldherr (1998) traces the use of visual imagery in the Roman narratvie of spectacle, tying together the spectacle of our Torquanus's defeat of the Gaul with his son's shameful duel, for which he was executed, which came from his lust for the mirage of *spolia*.

enables us to view his speech problems from various angles. Claudius' life is discussed in section eight of this chapter.

13. Emperor Vitellius' son (first century CE). In Suetonius' biography, Vitellius is depicted as base and cruel. Petronianus, his first son by Petronia, was blind in one eye. Vitellius had the boy killed after falsely accusing him of attempting to murder his father. With Galeria Fundana he had a second son, but the boy had such faltering speech that he was practically mute (*sed marem titubantia oris prope mutum et elinguem*). See Suetonius, *Vitellius* 6. Nothing further is known about the boy, whose name is never again mentioned. See Eck (1994) for prosopographical details on Galeria Fundana.

14. Marcus Aquilius Regulus (second century CE). This senator and *delator* during the reigns of Nero and Domitian was the *bête noire* of Pliny the Younger, who states that he became considered an orator despite the fact that he lacked all qualities to become a good public speaker. He was said to have a weak physical appearance, a confused way of speaking, he hesitated while speaking (*haesitans lingua*), was slow in finding a good argument and was not skilled in the art of memorisation. Reflecting the corrupt age of the end of the Julio-Claudian period and the transition afterwards, Aquilius Regulus' impudence and rage (*impudentia ipsoque illo furore*), rather than his skill, led to his success as an orator. See Pliny the Younger, *Epistulae* 4, 7, 4–5.

15. Anonymous man healed by Jesus. In the region of Decapolis, a deaf person who also suffered from difficulty of speaking was brought to Jesus. He was healed after Jesus put his fingers in his ears and touched his tongue, uttering the words Effeta. Interestingly, the Vulgate version identifies the man as deaf and mute (Vulg. Marc 7: 32 *surdus et mutus*), while the Greek suggests deafness and difficulty in speaking (Marc 7: 32: κωφὸς καὶ μογίλαλος).

16. Ephrem the Syrian (third century). This great Syrian saint was slow in speaking, which, according to his biographer Gregory of Nyssa resulted from his thought process rather than from his mouth or tounge: "Slow in explaining the motions of his mind … not so much from stupor of the tongue, as from speech of thinking … since in fact the profundity of the doctrine so absorbed his tongue, that he was unable to utter the thoughts of his mind, since he lacked organs sufficiently suited to the office of preaching" (transl. Wollock (1997) 142). See Gregory of Nyssa, *Vita atque Encomium Sancti Patris Nostri Ephraem Syri* [PG 46, 835].

Addendum

In an apocryphal tradition of the Iliad, both Hector and Neoptolemus are said to have been suffering either from stuttering or from lisping, as well as from other difficulties. The Latin text of Dares the Phrygian (very popular during the Middle Ages) probably dates not later than the sixth century. See Dares the Phrygian, *De Excidio Troiae Historia* 12 "Hector was lisping, fair, with curled hair, a squinter, with swift limbs, a venerable face, a beard, a decent person, martial, of great virtue, clement towards his citizens, dignified and apt to be loved" (*Hectorem blaesum, candidum, crispum, strabonem, pernicibus membris, vultu venerabili, barbatum, decentem, bellicosum, animo magnum, civibus clementem, dignum et amori aptum*); 13 "Neoptolemus was a big man, longing after men, choleric, lisping, with goodlooking face, hooked, with round eyes, naughty (*Neoptolemum magnum, virosum, stomachosum, blaesum, vultu bonum, aduncum, oculis rotundis, superciliosum*).

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MONSTROUS BIRTHS AND RETROSPECTIVE DIAGNOSIS: THE CASE OF HERMAPHRODITES IN ANTIQUITY

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1. Introduction

Nearly 3% of all live born infants in developed Western countries today present an obvious major congenital anomaly or birthdefect. Other congenital anomalies are detected at some time after birth, resulting in an overall incidence of about 8% in 5-year-olds.[1] Some of these are lethal, but many are treatable by modern biomedicine. The modern scientific field of human congenital anomalies is known as teratology. Many of the anomalies are still branded with taboos, fears and intimations of 'the unspeakable'. Going back in time, one wonders about the existence and interpretation of such congenital anomalies in the past. In this context, I will focus on the issue as it relates to the ancient Greek and Roman world. Sadly, our knowledge of so-called 'monstrous' births in antiquity is still very limited. In the Graeco-Roman context most of them had no medical connotation, simply because medicine could not provide treatment options. It was not very interested in most congenital anomalies, to judge by the few written sources from this time. Luckily, there is a specific period of Roman history in which monstrous births were given a religious interpretation; consequently, a series of so-called 'prodigies' has been passed down to us. Several recent researchers have developed many new insights about these.[2] However, few of them are grounded in medicine. Despite the constant urge to interpret these prodigies in accordance with modern teratological terminology, i.e. to carry out a retrospective medical diagnosis, every diagnostic researcher should beware of the lurking pitfalls. The chief aim of this paper is to elucidate this problem. Uncertain or equivocal sex differentiation is a particularly instructive example, and

* I am very grateful to Christian Laes and Patty Baker for their kind invitation to present this paper, thanks to Chris Goodey for improving my English. Of course, for all remaining errors I alone am responsible.

[1] Moore, Persaud (2003) 184.

[2] See for example Champeaux (2003), Rasmussen (2003), Engels (2007).

I will therefore focus on this specific disorder, namely the relatively rare phenomenon of the 'hermaphrodite'. The two hypotheses to be tested are as follows. Is there something like a continuous story, an anthropological constant, concerning hermaphrodites? And is it possible to equate the ancient hermaphrodite with modern, biomedically defined disorders of sex differentiation? Of course, this is a wide-ranging issue and can only be touched on in this paper. By way of preliminary orientation, intersex states in human beings are estimated today to occur in only 1 in 5,000 live births.[3]

2. Two Important Preliminaries

Christian Laes has argued that in order to get as close as possible to the contextual meaning of any historical topic, one has to collect all available clues and sources.[4] A focus on medical texts alone is too narrow, and obscures the fact that even these ancient medical texts—if indeed we hold them to be true medical texts in the strict sense—have their contextual elements, which must be respected.[5] People undertaking medical activities in antiquity had their own specific ancient contexts. Conversely, the same must be true of any ancient non-medical writer using strictly medical terms.

Before going into more detail, let us look briefly at one famous case of a supposed individual hermaphrodite: the eunuch and philosopher Favorinus of Arelate (ca. 80–160 CE). The *Suda*, the ancient Byzantine lexicon, reports him as having been a hermaphrodite from birth.[6] The biographer Flavius Philostratus describes him as ἀνδρόθηλυς and beardless even in old age;[7] the satirist Lucian of Samosata describes him as being without a beard (πώγωνα)[8] and without testicles (ὄρχεις), an academic eunuch (Ἀκαδημαϊκὸς εὐνοῦχος).[9] Philostratus' biography of Favorinus reports no descendants, thereby making him appear infertile. These features led Mason in 1978 to make a retrospective diagnosis of Reifenstein's syndrome,[10] thus turning Favorinus into a famous case of hermaphroditism for classicists.[11] But the descriptions are not that

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[3] Sax (2002).

[4] Laes (2011) 465.

[5] Gleason (1995) 91.

[6] Suda phi 4: γεγονὼς δὲ τὴν τοῦ σώματος ἕξιν ἀνδρόγυνος [ὅν φασιν ἑρμαφρόδιτον] (androgynos [or so-called hermaphroditos] from birth).

[7] Philostratus, *Vitae Sophistarum* 489.

[8] Lucian, *Demonax* 13.

[9] Lucian, *Eunuchus* 7.

[10] Mason (1978).

[11] Wacke (1989) 879; Horstmanshoff (2000) 103, n. 10; Amato (2005) 13, n. 39; Fornaro (2009) 170.

clear or firm, and so the medical case he makes is rather dubious.[12] According to the LSJ lexicon Favorinus's designation as ἀνδρόθηλυς is unique in ancient literature, though no doubt it makes sense to identify ἀνδρόθηλυς with ἀνδρόγυνος. No autobiographical description, statue[13] or clear anatomical description of Favorinus has come down to us. Descriptions and designations of Favorinus' physiognomy and behaviour are reported by other authors (Philostratus,[14] Antonius Polemo[15]) who were not well disposed towards him. The reliability of these authors has since been reassessed, in a negative light. Moreover, these reports generally should be viewed in the context of professional rivalries within the second sophistic schools of the second century CE.[16] Medical usage even of the term Reifenstein syndrome itself is now somewhat out-of-date. The usual medical acronym is now pAIS (partial Androgen Insensitivity Syndrome). pAIS covers a spectrum of at least four different known syndromes: Reifenstein, Gilbert-Dreyfus, Rosewater, and Lubs.[17] Distinguishing between these syndromes is no easy task, even for today's expert clinician. Besides, the reported lack of visible testicles could be diagnosed, medically at least, as either *maldescensus testis* (the testicle has not reached the scrotum via the inguinal channel), cryptorchidism (the testicle is situated in the abdominal cavity),[18] or true anorchia (no testicle at birth). Again, this description is to be found not in strictly medical writings about Favorinus but in problematic, non-medical literature such as

12 Charlier (2008) 287: "le problème est plus complexe".

13 It is reported that there were once statues of Favorinus in both Athens and Corinth, but they were removed in connection with some dubious *damnatio* by the Emperor Hadrian. Favorinus himself reports this in his speech to the Corinthians: Gleason (1995) 8.

14 The reliability of this has been questioned in some respects: Gleason (1995) 146 f. For further literature on Philostratos' reliability, see Amato (2005) 1, note 1; 6.

15 There is a very unfriendly description (without naming Favorinus openly) in the fragmentarily transmitted physiognomic writings of his rival and contemporary, the rhetorician Antonius Polemo (ca. 88–144 CE); on the problematic indirect transmission history of Polemo's work, see Gleason (1995) 31–32. Polemo's anonymous description of Favorinus should be judged in the context of his typical physiognomic examples, which have a sinister and polemical tone (with particular focus on the eyes—and a distaste for effeminacy and softies) and should not be taken literally: Gleason (1995) 40; Amato (2005) 12 and 13, n. 39. Compare Mesk (1932) 59: 'Es ist auch kaum zu bezweifeln, daß die Körperbeschreibung [des Favorinus] im ganzen richtig sein wird, das Charakterbild ist aber sicherlich gehässig verzerrt, soweit nicht überhaupt Unmögliches oder doch, wenn wir Philostrat vergleichen, Unwahrscheinliches darin vorkommt; maßlos übertrieben ist es jedenfalls.'

16 Gleason (1995) 47; Fornaro (2009).

17 Holm (1998) 65.

18 Cryptorchidism on its own occurs in 2.7 % of normal full-term newborn males; over 40 known syndromes are associated with it: Holm (1998) 70.

satires and philosophical polemics. All we know is that he may have had no visible testicles, spoke in a high-pitched voice, was beardless, and had a smooth character. The latter three characteristics may have been simply part of his established style as rhetorician; it is interesting to note that some of his pupils (e.g. the Cilician sophist Alexander)[19] adopted this particular, 'androgynous' style in their own performances, without being labelled eunuchs or *androgyni*.[20] Favorinus himself might have been an intersex person today, but in antiquity he was classified as a congenital (uncastrated) eunuch, which constitutes a category on its own.[21] For this reason, I have excluded Favorinus from my listing of individual hermaphrodites in antiquity.[22]

3. Hermaphrodites in Ancient Graeco-Roman Written Sources

Any collection of reported cases of 'hermaphrodites' in ancient literature has to call upon a range of sources. Mine are the annalistic historians (Diodorus of Sicily, Livy, Iulius Obsequens, Tacitus), Pliny the Elder, and the mysterious *Book of Marvels* by Phlegon of Tralles, which has come down to us in fragments. This choice of very heterogeneous sources is of course tentative, and makes no claim to completeness.

In the extant ancient literary sources I have identified 30 references in all. There are two obvious main types: bisexuality (two sexes in the same person) and unidirectional sexual transformation (female-to-male).[23] Male-to-female change is not mentioned in relation to hermaphrodites.[24]

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19 Gleason (1995) 76.

20 Gleason (1995) 162. On appearances, performance and especially polemics and irony among Graeco-Roman philosophers in Favorinus' time, see Fornaro (2009).

21 On this ancient category of the eunuch see Horstmanshoff (2000).

22 There may be another dubious case: Gleason (1995) 6, note 23, names the late-third-century presbyter of Antioch, Dorotheus, as a 'born eunuch' and the closest parallel to Favorinus' case.

23 These two categories can be explicit found in Pliny the Elder, *Naturalis Historia* 7, 34 (type 1: *gignuntur et utriusque sexus*) and 7, 36 (type 2: *ex feminis mutari in mares*).

24 There is only one, disputed exception in Ausonius (epigram 72): see note 50. Artemidorus' second-century text on dreams refers to both sex changes (in dreams, a man changes into a woman, a woman into a man): *Oneirocritica* 1,50. See Translation and Commentary by Robert J. White. 2nd edition (Torrance, 1990) 57.

Table 1: Reported cases of bisexuality (n = 17)

Year (BCE)	Type	Age	Place	Source
ca. 314/3	child with two sets of genitals, male and female	0	Aitolia	Phlegon 2
209	ambiguum inter marem ac feminam sexu infantem, androgynos vulgus	0	Sinuessa	Livy 27, 11, 4
207	incertus mas an femina esset natus, quadrimo parem, ut Sinuessae biennio ante	0	Frusino	Livy 27, 37, 6
200	semimas, incertus infans, masculus an femina	0	Sabini	Livy 31, 12, 6
200	semimas, item ambiguo sexu	16	Sabini	Livy 31, 12, 8
186	semimas	12	Umbria	Livy 39, 22, 5 = Obsequens 3
142	androgynus	0	Luna	Obsequens 22
133	androgynus	0	ager Ferentinus	Obsequens 27a
125	androgynus	0	Rome	Phlegon 10
122	androgynus	0	forum Vessanum	Obsequens 32
119	androgynus	8	ager Romanus	Obsequens 34
117	androgynus	10	Saturnia	Obsequens 36
98/97	androgynus	?	Rome = Urbs	Obsequens 47, 48
95	androgynus	0	Urbinum	Obsequens 50
92	androgyni duo	?	Arretium	Obsequens 53
54 CE	biformis hominum partus (unknown number)	0	Rome?	Tacitus Ann. 12, 64

Table 2: Reported sex changes (n = 13)

Year	Type	Age	Place	Source
214 BCE	woman > man		Spoletum	Livy 24, 10, 10
171 BCE	girl > boy		Casinum	Pliny NH 7, 36
ca. 145 BCE	Herais > Diophantos, hermaphroditos		Abae, Arabia	DS 32, 10, 2–10
ca. 115 BCE	Kallô > Kallôn		Epidauros	DS 32, 11, 1–4
ca. 90 BCE	androgynus, married		near Rome	DS 32, 12, 2
ca. 90 BCE	another such case		Athens	DS 32, 12, 2
?	Areskusa > Areskon		Argos	Pliny NH 7, 36
?	girl > boy		Smyrna	Pliny NH 7, 36

Year	Type	Age	Place	Source
ca. 50 CE	woman > Lucius Consitius		Thysdrus, Africa	Pliny NH 7, 36
45 CE	maiden > man, androgynus	13	Antioch	Phlegon 6
53 CE	Smyrnean maiden Philotis > man		Mevania, Italy	Phlegon 7
53 CE	Symphérusa > Sympherô, androgynus		Epidauros	Phlegon 8
116 CE	married woman Aitete > Aitetos		Laodikeia, Syria	Phlegon 9

Tables 1 and 2 list the 30 references to individuals with sex ambiguity in the literature examined. The period constitutes nearly four centuries (314 BCE to 116 CE), covering Hellenistic Greece, the Roman Republic, and the Roman Empire in Italy and beyond. There are fifteen references to *androgyni* between 209 BCE and 92 BCE: eight newborns, four adolescents (eight, ten, twelve and sixteen years of age) and three of unknown age (perhaps including adolescents). The first five cases on this list are described as having an ambiguous sexual state, one of them being a marvellous ghost story that describes a newborn with no explicit terminological designation; at the end comes the single report of an unknown number of prodigious births of *biformis* newborns in 54 CE, after a lapse of almost 150 years. In three cases the term *semimas* (half-man) is used. Unidirectional sex changes (female-to-male only) are mentioned thirteen times between 214 BCE and 116 CE.

3. Modern Diagnoses and Hypotheses

Much, of course, has been said, in recent (and not so recent) medical literature about the 'fact' of 'hermaphrodites' being a historical constant, and about hermaphroditism as a specific and treatable medical disorder. I will cite here just a few modern interpretations of the ancient reports.

Franco Sartori, in his paper on "Monster births in Obsequens' Book of Prodigies" asserted that most of the reported cases, including hermaphrodites, find a corresponding rationale in recent medical knowledge.[25] Another non-scientist, William F. Hansen, in his 1996 edition of the Book of Marvels by

[25] Sartori (1993) 19: "a maggior parte dei casi [dei fenomeni segnalati da Ossequente] trova razionale spiegazione nella odierne conoscenze mediche".

Phlegon of Tralles,[26] says of miraculous stories about people with sexual ambiguity or sex change that 'the ancient historical narratives reflect the physical realities of hermaphroditism, but simplify it.'[27] This interpretation remains circular and to some extent ahistorical, simply projecting recent complex thoughts about sexual ambiguity into the past and assuming that historical views were simplistic by contrast with modern ones. Annie Allély, in her study of malformed children taken from reports of prodigies during Roman Republic, claims that all cases of hermaphrodites in these reports correspond to scientific accounts of hermaphrodites and pseudo-hermaphrodites today,[28] adding that from a modern point of view sexual ambiguity and sex change are to be considered the same thing.[29] George Androutsos deals with a wide range of accounts of the hermaphrodite in ancient literature,[30] supposing some kind of continuing history and ending with positive remarks about the successes of medical therapy today.[31] Philippe Charlier, a French physician and expert in palaeopathology, discusses the topic of 'Hermaphrodites and sexual ambiguity' quite extensively.[32] Admitting that there are no unequivocal human remains from antiquity such as skeletons and bones that allow of any clear diagnosis,[33] he meticulously discusses nearly all the evidence from the period relating to the 'hermaphrodite.' He ends up with a table of 22 differential diagnoses, yet without taking account of recent developments in research into intersex and its terminology.[34]

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[26] Seen on URL: http://sites.google.com/site/williamfhansen/Home (last received on 07.08.2011).

[27] Hansen (1996) 124. Somewhat earlier he says, "something very like these reported transformations can actually happen", and relates this to the famous but itself historical case of the 'hermaphrodite' Herculine Barbin, as reanalysed by Michel Foucault: Hansen (1996) 123.

[28] Allély (2003) 137: "Les cas décrits par les auteurs anciens correspondent à ce que les scientifiques appellent aujourd'hui les hermaphrodites pures ou les pseudo-hermaphrodites masculins et féminins et les descriptions des auteurs classiques correspondent à des phénomènes scientifique". To prove this, she cited (unfortunately wrongly) an already outdated French medical volume of 1984, *Médicine de la reproduction masculine* by Pierre Mauvais-Jarvis (Paris, 1984).

[29] Allély (2003) 137: "D'un point de vue scientifique l'ambiguïté sexuelle et l'évolution d'une apparence à une autre est une seule et même chose".

[30] Androutsos (2006).

[31] Androutsos (2006) 217: "Fortunately, nowadays individuals with such problems are not considered 'monsters' but patients with defects in the differentiation of the genital system and most of them are successfully managed".

[32] Charlier (2008) 255–308.

[33] Charlier (2008) 255: "Il n'existe en effet aucun cas squelettique d'individu caractérisé spécifiquement par une ambiguïté sexuelle".

[34] Charlier (2008) 308.

4. Hermaphrodites in Their Ancient Context

To test out these various forms of retrodiagnosis, and for a better understanding of them, I will start with the ancient Graeco-Roman context, beginning with the word for the 'thing' itself.

Terminology

Ancient authors use various terms for the 'hermaphrodite.' We can find at least four different ones: *androgynos* (ἀνδρόγυνος), *hermaphroditos* (ἑρμαφρόδιτος), *semimas* or *semivir*, and finally δίμορφος, with its Latin equivalent *biformis*. These terms usually appear in their masculine form.[35]

The first, most frequently applied and most ancient term—if we are to trust Pliny the Elder[36]—seems to be ἀνδρόγυνος, man-woman, which can be traced back as far as Herodotus in the fifth century BCE.[37] It was used throughout antiquity: by Plato,[38] in the Hippocratic Corpus (*On Regimen I*, see below), then in Roman times by Cicero,[39] Livy,[40] and Pliny.[41] It is in Livy that we can find a short and straightforward definition: a newborn child with an ambiguous sex state labelled *androgynos* (Livy 27, 11, 4–5: *natum*

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35 Compare Long (2006) 15: "The insistence on using the masculine form *natus* for the birth of the hermaphrodite, and later the word *semimares*, indicates the difficulty ancient Romans experienced when faced with gender ambiguity". In literature, there also exists the female form *androgyne*, meaning a mannish woman, e.g. in Valerius Maximus, *Facta et dicta memorabilia* 3, 1: *quam, quia sub specie feminae virilem animum gerebat, Androgynen appellabant*. Augustine holds that normally the masculine form is used because it is the 'better' *sexus*: Augustine, *De Civitate Dei* 16, 8: *a meliore tamen, hoc est a masculino, ut appellarentur loquendi consuetudo praevaluit. Nam nemo umquam Androgynaecas aut Hermaphroditas nuncupavit*. Strangely, it is only Lucretius who uses the female form for ambigious gender: Lucretius, *De Rerum Natura*, 5, 839: *androgynem, interutrasque nec utrum, utrimque remotum*. Though theoretically possible, the neutral form is never used for hermaphrodites, see Wacke (1989) 875.

36 Pliny the Elder, *Naturalis Historia*, 7, 34. This work was written around 77 CE; Groneberg (2008) 102, note 64.

37 Herodotus, *Historiae* 4, 67: the Enarees, Scythian diviners for the goddess Aphrodite, who are ἀνδρόγυνοι.

38 Plato, *Symposium* 189d–193d: ἀνδρόγυνοι in a fictitious discussion of the evolution of gender: Groneberg (2008) 85–89.

39 Cicero, *De Divinatione* 1, 98: *ortus androgyni nonne fatale quoddam monstrum fuit?*

40 Livy, *Ab Urbe Condita* 27, 11, 4–5.

41 Pliny the Elder, *Naturalis Historia* 7, 34: *Gignuntur et utriusque sexus quos hermaphroditos vocamus, olim androgynos vocatos et in prodigiis habitos, nunc vero in deliciis*; 7, 15: *Supra Nasamonas confinesque illis Machlyas androgynos esse utriusque naturae, inter se vicibus coeuntes, Calliphanes tradit. Aristoteles adicit dextram mammam iis virilem, laevam muliebrem esse.*

ambiguum inter marem ac feminam sexu infantem, quod androgynos vulgus, ut pleraque, faciliore ad duplicanda verba Graeco sermone, appellat).

Hermaphroditos (ἑρμαφρόδιτος) is synonymous with *androgynos*.[42] In Pliny, *hermaphroditos* is one of three subtypes of *semiviri*, half-men.[43] The term *hermaphroditos* itself indicates rather a religious and mythological context.[44] In the myth of Hermaphroditos in the *Metamorphoses* of Ovid and, much later, in the 'surgical manual' by Paulus of Aegina (7th century), it signifies a combination of the divine parental names of Hermes and Aphrodite.[45] Diodorus of Sicily describes an individual woman, Herais, who later changes into a man and is explicitly called hermaphrodite.[46] The Latin *semimas* or *semivir* is used rarely. I have found it only in Livy (and in his abridgement of Obsequens),[47] in Ovid,[48] and in Pliny the Elder,[49] who maintains a threefold classification of *semiviri* to which I shall return later.[50] Finally, there is δίμορφος

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42 Pliny the Elder, *Naturalis Historia*, 7, 34 (see n. 41); Augustinus, *De Civitate Dei* 16,8 (*Androgyni, quos etiam Hermaphroditos nuncupant*).

43 Pliny the Elder, *Naturalis Historia* 11, 263 (see n. 49).

44 Bien (1997) 30.

45 Ovid, *Metamorphoses* 4, 384: [*Hermaphroditus ait:*] *pater et genetrix, amborum nomen habenti*; Paulus Aegineta, *De re medica* 6, 69 (CMG IX 2, 112,6–20).

Moreover, there are allusions to the genealogy of the name in Diodorus Siculus 4, 6, 5 (Ἑρμαφρόδιτον, ὅν ἐξ Ἑρμοῦ καὶ Ἀφροδίτης γεννηθέντα τυχεῖν τῆς ἐξ ἀμφοτέρων τῶν γονέων συντεθείσης προσηγορίας); Lucian, *Dialogi Deorum* 15 (Hermaphroditus as the son of Hermes and Aphrodite) and 23 (Hermaphroditus as the son of Aphrodite beside Amor and Priapus), and finally repeated in the Christian author Eusebius of Caesarea, *Praeparatio Evangelica* 14 (ἐξ Ἑρμοῦ καὶ Ἀφροδίτης γεννηθέντα).

46 Diodorus Siculus 32, 10, 4: [Ἡραΐς] καταδοξάζεσθαι δὲ ὑπὸ τῶν συνειδότων τὴν περιπέτειαν ἑρμαφρόδιτον εἶναι ("[Heraïs] it was assumed, however, by those who were privy to the strange secret that she was an hermaphrodite"; transl. Walton).

47 Livy, *Ab Urbe Condita* 31, 12, 8 (in 200 BCE: *foeda omnia et deformia errantisque in alienos fetus naturae visa: ante omnia abominati semimares iussique in mare extemplo deportari, sicut proxime C. Claudio M. Livio consulibus deportatus similis prodigii fetus erat*); 39, 22, 5 (= Obsequens 3, in 186 BC: *semimas duodecim ferme annorum inventus*).

48 Ovid, *Metamorphoses* 4, 381 (Hermaphroditus: *semimarem fecisse*); 4, 386 (*semivir*); 12, 506 (referring to the myth of the Thessalian Kainis, who changes from woman to man and defeats centaurs: *nos semimari superamur ab hoste*).

49 Pliny the Elder, *Naturalis Historia* 11,263: three classes of *semiviri* (*homini tantum iniuria aut sponte naturae franguntur, idque tertium ab hermaphroditis et spadonibus semiviri genus habent*).

50 The epigrams of Decimus Magnus Ausonius contain three references to *semiviri*: Epigram 72, 11–12 (*sensit semivirum fons Salmacis Hermaphroditum,/ vidit nubentem Plinius androgynum*); 99, 3–4 (*semivir ipse / Scantiniam metuens non metuit Titiam*); 101, 1 (*Semivir uxorem duxisti, Zoile, moecham*): see text and discussion in Kay (2001), 55,59–60 (text) and 212, 260, 264 (commentary). Only in epigram 72 *semivir* is used in the sense of *androgynos*, albeit symbolically, thus rendering any possible relation to reality doubtful: Delcourt, Hoheisel (1988) 680. In epigrams 99 and 101 the term means passive homosexual ('pathic').

and Latin *biformis*, used three times by Diodorus,[51] once by Ovid to describe the bisexual Hermaphroditos after his involuntary union with Salmacis,[52] and just once in the *Annals* of the Roman historian Tacitus, where it describes certain newborns who probably had ambiguous genitals.[53]

Political and Religious Contexts

In a religious context there is, on the one hand, the Greek fertility cult of the bisexual god Hermaphroditos, who was of oriental origin,[54] and on the other, the public treatment of individuals with unclear genital states as ill-omened monsters. The Roman Republic had a kind of prodigy system, as reported chiefly by Livy.[55] From 207 BCE onward, in times of crisis and war, *androgyni* were interpreted as the most fearful sign (*prodigium*) from the Gods of Rome of something serious happening.[56] To restore the former peaceful state with the Gods (*pax deorum*), the sign itself had to be deleted, and very specific rites (sacrifices, chants, processions) performed. The future of the Roman Republic, good fortune in war, and (in case of the 'hermaphrodite') the future of all mankind, depended on this.[57] 'Hermaphrodites' are repeatedly reported killed by drowning,[58] burning, or starving after exposure on lonely islets.[59] The last reported case of such a 'hermaphrodite,' eliminated by burning is from 90 BCE Athens.[60]

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[51] Diodorus Siculus 32, 10, 2 (φυλάξασθαι τὸν τόπον τὸν ἐνεγκόντα τὸν δἱμορφον—beware of the birthplace of the dímorphos); 32, 10, 9 (ἐν ταῖς Ἄβαις καθ' ὅν τόπον ὁ δίμορφος ἐγεγένητο, "at Abae, the birthplace of the dimorphos"); 32, 12, 1 (εἰς δίμορφον τύπον [...] ἀδύνατον "dimorphos typos [...] adynatos"). Furthermore, it is used as an epithet for the god Dionysos, being partly old with a long beard, partly young and soft or effeminate (τρυφερόν καὶ νέον) or, in a second version, being in two different states of drunkenness, either joyous or sullen (καὶ τῶν μὲν ἱλαρῶν, τῶν δὲ ὀργίλων γινομένων) in Diodorus Siculus 4, 5, 3 (δίμορφον ὠνομάσθαι τὸν θεόν "the god [Dionysos] has been called two-formed").

[52] Ovid, *Metamorphoses* 4, 387 (*parens nati rata verba biformis*).

[53] Tacitus, *Annales* 12, 64 (*biformis hominum partus*). Allély (2004) 86 suggests that Tacitus has a liking for paraphrase and uses the extraordinary term *biformis* for that reason.

[54] Bartsocas (1985) 6; Delcourt, Hoheisel (1988) 654–661; Wacke (1989) 874. There are no traces of such a cult in Italy, only the myth created by poet Ovid: Delcourt, Hoheisel (1988) 665–666.

[55] Extensively overviewed by Engels (2007). On congenital anomalies reported as *prodigia* see my own contribution Graumann (2012).

[56] Cicero, *De Divinatione* 1, 98 (*ortus androgyni nonne fatale quoddam monstrum fuit?*); Livy, *Ab Urbe Condita* 27, 37, 6: (*foedum ac turpe prodigium*); Allély (2003) 138.

[57] Brisson (1997) 38; Rasmussen (2003) 30.

[58] Drowning in the river (the Tiber) or in the sea (the Mediterranean) seems to have been the traditional Etrurian way of eliminating hermaphrodites; Brisson (1997) 29.

[59] Allély (2003) 136–139, 151.

[60] Diodorus Siculus 32, 12, 2. Sartori (1993) 20.

This clearly changed during the Roman Empire. According to Pliny the Elder,[61] 'hermaphrodites' were no longer regarded as *prodigii* but as *delicii*: entertaining curiosities, with erotic connotations.[62] When exactly this change happened is not known. The last report by Diodorus (ca. 90 BCE) coincides with the Roman Social War (90–87 BCE). Emperor Augustus is known to have been very afraid of deformed humans.[63] I can therefore only speculate that with the end of the Roman Republic came an end, too, to the religious killing of 'hermaphrodites'. The last known report of them in Imperial Rome comes from the historian Tacitus in 54 CE, at the end of the reign and life of the Emperor Claudius.[64] Tacitus does not report expiation rites or killings. Eventually, in the fourth century, Augustine refers in a Christian context to 'hermaphrodites' as 'creations of God.' He recognised their rarity, their existence across human history, and their right to a life that came from God himself.[65]

Morphological, Medical and Philosophical Contexts

Morphological descriptions can often be found in a philosophical and medical context, sometimes accompanied by etiological speculation. According to Soranos of Ephesus, the binary sex distinction between male or female is the first act of the midwife after childbirth, but it is not explicitly stated how she makes it (one supposes it was thought obvious).[66] In the Hippocratic treatise 'On Regimen' (*De victu* I), from fourth century BCE,[67] an explanatory model for sex differentiation relating to ἀνδρόγυνος can be found: the body of any human being is seen as mixture of parental secretion from both

61 Pliny the Elder, *Naturalis Historia* 7, 34: *Gignuntur et utriusque sexus quos hermaphroditos vocamus, olim androgynos vocatos et in prodigiis habitos, nunc vero in deliciis.*

62 Hermann-Otto (1994) 16, 401; Weiler (1994) 16–18; Laes (2003). Laes (2010) advises strongly against a too narrow view of *delicium* only as sexual subject.

63 Suetonius, *Augustus* 83: *Nam pumilos atque distortos et omnis generis eiusdem ut ludibria naturae malique ominis abhorrebat.*

64 Tacitus, *Annales* 12, 64: *biformis hominum partus*. More on prodigies in Tacitus, see Morgan (2000).

65 Augustine, *De Civitate Dei* 16, 8: *Androgyni, quos etiam Hermaphroditos nuncupant, quamuis ad modum rari sint, difficile est tamen ut temporibus desint, in quibus sic uterque sexus apparet, ut, ex quo potius debeant accipere nomen, incertum sit; a meliore tamen, hoc est a masculino, ut appellarentur, loquendi consuetude praeualuit. Nam nemo umquam Androgynaecas aut Hermaphroditas nuncupavit*. Cf. Groneberg (2008) 108.

66 Soranus, *Gynaecia* 2, 5: προσεπιθεωρήσασα πότερον ἄρρεν τὸ ἀποκεκυημένον ἐστὶν ἤ θῆλυ, καὶ καθὼς γυναιξὶν ἔθος ἀποσημαινέτῶ.

67 [Hippocrates], *De victu* 1, 28 (6, 502–504 Littré). Date: see Jouanna (1992) 559.

man and woman, resulting in six types or possibilities.[68] Male material from both father and mother results in an optimal man, female matter from both father and mother in an optimal woman. Fully effectual male material from the father and less effectual material from the mother, which fades under the domination of the stronger male material, generates a moderate form of male, and (vice-versa) a moderate form of female. Ἀνδρόγυνος develops when the father yields the less effectual female matter and the mother male matter: a kind of crossover theory.[69] A mannish woman can develop similarly, sometimes called (though not in the Hippocratic Corpus) ἀνδρόγυνη.[70]

Something similar can be found in Aristotle, who speculates that human hermaphrodites are the result of co-operation between male semen and the weaker female semen (regarded as defective), without either of them actually prevailing.[71] He writes of 'double genital parts', male and female, in hermaphrodites.[72] In the work of Plato, ἀνδρόγυνος is only mentioned as mythological third gender, in a fictitious discussion about erotic desire.[73] In Lucretius *androgynos* appears only once, as a 'prodigious' being, neither man nor woman and remote from either.[74]

In a miraculous ghost story located at the end of the fourth century BCE and transmitted by Phlegon of Tralles, a newborn in an ambiguous sex state is described more specifically; both sets of genitals are present, male and female, with an upper, hard male part, and a softer, female part around the thighs.[75] There is another isolated description, relating to a Sibylline Oracle about the birth of a hermaphrodite in Rome in 125 BCE: "One day a woman will bear a hermaphrodite having all the male parts and all the parts that infant females manifest".[76] Curiously, in this 'Book of Marvels' there are also two consecutive stories about male parturition; however, these stories were obviously not

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68 Gleason (1990) 394 calls this "a continuum of masculine possibilities".

69 Jones, Stallybrass (1991) 82: "Hermaphroditism [...] is a problem of the act of conception itself".

70 Cf. Lucretius 5, 839; Valerius Maximus, *Facta et dicta memorabilia* 8, 3, 1. See note 35.

71 Aristotle uses neither "hermaphroditos" nor "androgynos" in his descriptions: Aristotle, *De generatione animalium* 772b26–33. Bien (1997) 124; Long (2006) 14.

72 Aristotle, *De Generatione Animalium*, 770b, 30–35 (τὰ δὲ καί δύο ἔχοντα αἰδοῖα, τὸ μὲν ἄρρενος τὸ δὲ θήλεος); Bien (1997) 30.

73 Platon, *Symposium* 189d–193d. Cf. Groneberg (2008) 85–89.

74 Interestingly, he uses the female form *androgyne*. See note 35.

75 Phlegon, *De Mirabilibus* 2, 3: παιδίον αἰδοῖα ἔχον δύο, ἀνδρεῖόν τε καὶ γυναικεῖον (child with two sets of genitals) τὰ μὲν ἄνω τοῦ αἰδοίου ὅλως σκληρὰ τε καὶ ἀνδρώδη ἦν (upper part hard and male) τὰ δὲ περὶ τοὺς μηροὺς γυναικεῖα καὶ ἁπαλότερα (the part around the thighs is female and softer); Hansen (1996) 29.

76 Phlegon, *De Mirabilibus* 10; Hansen (1996) 40.

linked to sex ambiguity in the ancient context, nor have the recent overviews dealt with them.[77] From the Roman satirist Gaius Lucilius (ca. 180–103 BCE), we have only a fragment: "inberbi androgyni, barbati moechocinaedi" (beardless *androgyni*, bearded adulterers).[78] Without knowing the probably satirical context, I can only guess that these *androgyni* are beardless adults.[79]

Next, Diodorus's *Library of History* contains case studies (perhaps originally by Poseidonios[80]) dating from between 150 and 90 BCE. According to the original author, who is clearly very medically inspired, any hermaphrodite or ἀνδρόγυνος has a treatable disease (πάθος, νόσος) and is not to be seen as a marvel (τέρας); he excludes the bisexual form as non-existent in reality (to be δίμορφος is ἀδύνατος).[81] Bi-sexual forms are fakes or misrepresentations (ψευδογραφούσης), which can be revealed by experienced examination. This is what he wants to show with his cases of female-to-male transformation.[82] Two in particular are reported in detail. In the first, a married woman named

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77 Phlegon, *De Mirabilibus* 26 (first century BCE): in Egyptian Alexandria a male 'kinaidos' gave birth; 27 (56 CE): in Germania, in the Roman army under Titus Curtilius Mancias, a male slave of a soldier gave birth. Cf. Hansen (1996) 47; 159–161.

78 Lucilius, *Satura* 30, 1058. This fragment—like others of Lucilius—is highly problematic. It is only transmitted in a grammatical work by Nonius (*De compendiosa doctrina* 493, 22); its real place in book 30 of Lucilius' satires is unknown. The standard modern reference (F. Marx, *C. Lucilii Carminum Reliquiae, Volumen Posterius*, B.G. Teubner: Leipzig 1905) has the verse (i.e., fragment) number 1058; the English edition (*Remains of Old Latin, newly edited and translated by E.H. Warmington, vol.3, Lucilius, The Twelve Tables*, Loeb Classical Library 329, Harvard University Press: Cambridge/London 1938, 340 f.) gives it verse number 1048 (and translates "beardless she-males, bearded sodom-adulterers"), while the German edition by Werner Krenkel (*Lucilius, Satiren, Lateinisch und Deutsch, zweiter Teil*, Brill: Leiden 1970, 536 f.) gives it verse number 994 (interestingly, he translates it as "bartlose Eunuchen, bärtige männliche Huren", thus interpreting "androgynos" merely as "eunuch").

79 Robinson (1999) 216, note 30: "insulting sense".

80 Kudlien (1966) 322–323.

81 Diodorus Siculus 32, 12, 1: οὐκ ἄρρενος καὶ θηλείας φύσεως εἰς δίμορφον τύπον δημιουργηθείσης, ἀδύνατον γὰρ τοῦτο, ἀλλὰ τῆς φύσεως διὰ τῶν τοῦ σώματος μερῶν ψευδογραφούσης εἰς ἔκπληξιν καὶ ἀπάτην τῶν ἀνθρώπων ("It is not that the male and female natures have been united to form a truly bisexual form, for this is impossible, but that Nature, to mankind's consternation and mystification, has falsely given this impression by the bodily parts").

82 Diodorus Siculus 32, 12, 10–12 (four cases). Comparing those reports in content and description with the similar four stories of sex change in the *Book of Marvels* by Phlegon, credibility of these "marvel stories" increases in my view: Phlegon 6 (13 year old unnamed maiden changes on her wedding day painfully into a man, doctors couldn't help her, at least male genitals burst from her); 7 (in the maiden Philotis appeared male genitals, shortly before her wedding); 8 (Sympherusa changes into a man named then Sympherôn, and finally becomes a gardener); 9 (Aitete, already living in matrimony, becomes a man renamed Aitetos, explicitly seen by Phlegon himself). Furthermore, there are also similarities to the four short reports by Pliny the Elder (*Naturalis historia* 7, 36): married woman, woman on wedding day (explicitly seen by Pliny himself).

Heraïs in Abae/Arabia (ca. 145 BCE) has a severe lower abdominal swelling, which bursts on the seventh day to reveal a projecting male genital organ with testicles attached at the groin. The amazed physicians declare that this male genital has been concealed in an egg-shaped female organ. The woman then turns into a man and becomes a warrior. In the second case, from Epidauros (ca. 115 BCE), a young woman named Kallô, with no opening in her female genital parts save a hole for secretion, developed a painful swelling two years after her marriage. An apothecary[83] cuts into this genital swelling, letting out testicles and an imperforate penis, in which he cuts again to construct a urethra with a silver catheter and stent. This female-to-male person undergoes a change of name by adding the letter ***nu***, Kallôn. There is no report of either person having offspring, and they may therefore have been infertile.

In Book 7 of his *Naturalis Historia*, Pliny the Elder comments briefly on the tribe of Machlyas, who are *androgyni*, can copulate with themselves, and have a male breast on the right side and a female breast on their left. This, as far as I can tell, is one of the only statements about the physiognomy of *androgyni* that discusses more than the genital parts.[84] He then gives the two classes of *androgyni* mentioned above,[85] and in Book 11 he divides *semiviri* or half-men into hermaphrodites, eunuchs, and men who have lost their *natura* by disease or at birth.[86] In the same book he comments that hermaphrodites have the outer genital appearance of both male and female, while in a few women the genitals have a 'monstrous' resemblance to male genitals (this may be a reference to clitoral hypertrophy).[87] To Pliny, stories about sex changes are not fairy-tales (*non est fabulosum*). Underscoring this he reports of four individual cases of female-to-male change.[88] The first case (obviously cited from annalistic Roman literature) from 171 BCE mentions a girl-to-boy change (*puerum factum ex virgine*) in Casinum which was interpreted as *prodigium* (this boy was exposed and died on a lonely island). The next two credible cases of unknown date, eye-witnessed by a Roman named Licinius Mucianus (*visum a se*), describe another girl-to-boy change in Smyrna and

83 φαρμακοπώλης. Interestingly, it is this (quite heroic) person who does the surgery, explicitly not the physicians, who did not want to take responsibility for treatment.

84 Pliny the Elder, *Naturalis Historia* 7, 15. See note 41.

85 Pliny the Elder, *Naturalis Historia* 7, 34 (*gignuntur et utriusque sexus*); 7, 36 (*ex feminis mutari in mares*).

86 Pliny the Elder, *Naturalis Historia* 11, 263: *homini tantum iniuria aut sponte naturae franguntur, idque tertium ab hermaphroditis et spadonibus semiviri genus habent.*

87 Pliny the Elder, *Naturalis Historia* 11, 262: *contra mulierum paucis prodigiosa adsimulatio, sicut hermaphroditis utriusque sexus.*

88 Pliny the Elder, *Naturalis Historia* 7, 36.

then especially one particular person (Areskusa) in Argos becoming after her own marriage (*nupsisse etiam*) a male (renamed Areskon) with beard (*mox barbam et virilitatem provenisse*) who afterwards even has married another woman (*uxoremque duxisse*). The last case being, seen by Pliny himself (*ipse vidi*), mentions Roman citizen Lucius Consitius in Thysdrus who has changed from female to male on the wedding-day.[89]

In his treatise 'On Semen', the physician Galen of Pergamon makes a theoretical critique of Empedocles, who says that male seed produces male organs and female seed female organs; hence, generation by male and female seed together would result in offspring with complete sets of both male and female genital parts, like the so-called hermaphrodites that artists depict. In reality this is somewhat absurd (ἀλογώτερον), says Galen.[90] In the Pseudo-Galenic manual *Definitiones Medicae* we find under the entry ἑρμαφρόδιτος a being combined of male and female qualities that has only *one* genital part, made up from both.[91]

A descriptive classification of 'hermaphrodites' by the first-century medical writer Leonides has come down to us via Paulus of Aegina.[92] Leonides differentiates four morphological types. The first, male, type has a hairy vulva at the perineum. The second type has a similar feature at the middle of the scrotum. The third type has a pubic opening at the scrotum, with urinary discharge. The fourth type, the only female one, has male genitals above the vulva with three projecting parts, one penis-like in the middle and two testicle-like bodies at the sides. Paulus (or Leonides himself) says that only the third type is untreatable: the others can be healed by excision of the supernumerary parts and by treatment as for ulcers. Similar urogenital variants are medically known today, with innumerable individual differences. Cases of the third type can now be surgically corrected. But bearing in mind what we know about ancient medical techniques (the treatment of surgical wounds by cutting, burning and dressing), the treatment hinted at above, together with the emotionless narrative and the lack of information about

89 This story equals in content exactly the 'marvel story' in Phlegon 9 from 116 CE in Laodikeia, where the author (Phlegon himself?) also declares that he has seen the person by himself: τοῦτον καὶ αὐτὸς ἐθεασάμην. See note 82.

90 Galen, *De Semine* 2, 3, 17 (4, 619, 6–11 Kühn = CMG V 3, 1, 170, 19–23). Cf. Bien (1997) 30–31. Compare Galen's equally weighted statement about hermaphrodites in his commentary on Hippocratic Aphorisms: Galen, *Hippocratis aphorismi et Galeni in eos commentarii Hippocratis* 7, 43 (18, 148 Kühn).

91 Pseudo-Galen, *Definitiones Medicae* 448 (19, 453, 12–14 Kühn). Cf. Bien (1997) 31; Crifò (1999) 115.

92 Paulus Aegineta, *De re medica* 6, 69 (CMG IX 2, 112, 6–20). Cf. Kudlien (1966) 323; Bien (1997) 31.

the outcome, comes as a surprise to today's medical expert, who knows all the difficulties and complications caused by such treatment even using modern techniques: for example the development of stenosis and scars, and the loss of nerve function. In the subsequent chapter of Paulus's manual, he discusses enlargement of the clitoris (νυμφή) and its treatment separately, with no link to hermaphrodites.[93] From a modern medical viewpoint, the external sign of an enlarged clitoris could be interpreted as part of a disorder of sex differentiation, previously called female pseudo-hermaphroditism (e.g. in congenital adrenal hyperplasia).

In a Christian context, Augustine informs us that hermaphrodites are very rare, but have occurred in all past eras, and that they show both male and female genitals.[94] Finally, there is the satirical poetical epigram in Book 9 of the Palatine Anthology, possibly by Evenus of Athens, which reports a female-to-male change in the bridal chamber: 'I suddenly saw spring from my thighs the marks of manhood.'[95] In summary, though we can find some more or less detailed descriptions of hermaphrodites, it still remains unclear what currently known physical anomaly is being described in each case.[96]

The Juridical Context

Jurists from the Roman Imperial period such as Ulpian and Paulus acknowledged the real existence of 'hermaphrodites.' They classified them according to a binary male-female model in which one or the other prevailed.[97] If the hermaphrodite was classified as more like a male, he had the right to inherit, leave a will, and probably even adopt children.[98] 'Hermaphrodites' were distinguished from eunuchs by law.[99]

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93 Paulus Aegineta, *De re medica* 6, 70 (CMG IX 2, 112, 21–30).

94 Augustine, *De Civitate Dei* 16, 8: *in quibus sic uterque sexus apparet.*

95 *Anthologia Graeca* 9, 602 (ἀνδρὸς ἄφαρ μηρῶν ἐξελόχευσα τύπους·/νυμφίος ἐκ νύμφης δὲ κικλήσκομαι).

96 Aileen Ajootian therefore remains, unfortunately, partly right in saying that "although these monstra are described as being of indeterminate sex, no more specific details of their condition are provided, and it is not clear exactly what physical abnormalities may have been present": Ajootian (1995) 102.

97 *Digesta* 1, 5, 10 (Ulpianus): *Quaeritur: hermaphroditum cui comparamus? Et magis puto eius sexus aestimandum, qui in eo praevalet.* Cf. Wacke (1989) 879; Crifò (1999) 116; Allély (2004) 94.

98 *Digesta* 22, 5, 15, 1 (Paulus): *Hermaphroditus an ad testamentum adhiberi possit, qualitas sexus incalescentis ostendit*; *Digesta* 28, 2, 6, 2 (Ulpianus): *Hermaphroditus plane, si in eo virilia praevalebunt, postumum heredem instituere poterit.* Cf. Wacke (1989) 880–881; Crifò (1999) 116; Hirt (2004) 291.

99 Wacke (1989) 880.

The Sculptural Context

Sculptures of hermaphrodites have come to us from the Hellenistic and Roman eras.[100] They represent an artistic ideal of the mythological bisexual hermaphrodite, rather than a natural phenomenon. Any medical diagnosis of such sculptures or statues is therefore nonsensical, in my view.[101] One type of standing hermaphrodite is a female who openly reveals male genital parts (ἀνασυρόμενος). The other lies down or sleeps, with some element of surprise: viewed from one side a woman, but from the other exposing male and female external genital parts.[102] These sculptures were erected in domestic spaces like baths, probably having connotations of protection.[103] In this context, the following epigram from the Palatine Anthology is instructive: 'To men I am Hermes, but to women I appear to be Aphrodite, and I bear the token of both my parents. Therefore, not inappropriately, they put me, the Hermaphrodite, the child of doubtful sex, in a bath for both sexes (ἀνδρόγυνοι λυτροί).'[104]

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100 They were made in ancient Greece and then copied in Roman times; Delcourt, Hoheisel (1988) 666. For example, it is known that Greek artist Polykles (ca. second century BC) designed a sculpture of a hermaphrodite: Pliny the Elder, *Naturalis Historia* 34, 80 (*Polycles Hermaphroditum nobilem fecit*). The poet Martial describes one marble statue in his *Apophoreta* 174: *Hermaphroditus marmoreus: Masculus intravit fontis: emersit utrumque: / pars est una patris, cetera matris habet.* The poet Christodorus of Thebes (Egypt) knew about a bronze statue in the famous public gymnasium of Zeuxippos in Byzantium (founded under Septimius Severus in the third century, destroyed by fire in 532 CE): *Anthologia Graeca* 2, 1, 102–107 (Ἵστατο δ' Ἑρμαφρόδιτος ἐπήρατος, οὔθ' ὅλος ἀνήρ,/ οὐδὲ γυνή· μικτὸν γὰρ ἔην βρέτας· ἦ τάχα κοῦρον/ Κύπριδος εὐκόλποιο καὶ Ἑρμάωνος ἐνίψεις·/μαζοὺς μὲν σφριγόωντας ἐδείκνυεν, οἷά τε κούρη·/σχῆμα δὲ πᾶσιν ἔφαινε φυτοσπόρον ἄρσενος αἰδοῦς,/ξυνῆς ἀγλαΐης κεκερασμένα σήματα φαίνων. "There stood lovely Hermaphroditus, nor wholly a man, nor wholly a woman, for the statue was of mixed form: readily couldst thou tell him to be the son of fair-bosomed Aphrodite and of Hermes. His breasts were swelling like a girl's, but he plainly had the procreative organs of a man, and he showed features of the beauty of both sexes"; transl. Paton).

101 E.g., medical diagnoses of hermaphrodite statues ("It is obvious that ancient artists found an impressive subject to represent"), and diagnosis of congenital adrenal hyperplasia in a statuette ("Art has its share") by the Athenian pediatrician Bartsocas (1985) 7–8; see the critique in Charlier (2008) 296: "son diagnostic nous semble pour le moins abusive".

102 Ajootian (1997) 220–226; Robinson (1999) 215. The most famous example is the recumbent Hermaphrodite Borghese, now in the Louvre Museum, Paris.

103 Ajootian (1997) 230.

104 *Anthologia Graeca* 9, 783 (Ἀνδράσιν Ἑρμῆς εἰμί, γυναιξὶ δὲ Κύπρις ὁρῶμαι·/ἀμφοτέρων δὲ φέρω σύμβολά μοι τοκέων./τοὔνεκεν οὐκ ἀλόγως με τὸν Ἑρμαφρόδιτον ἔθεντο/ἀνδρογύνοις λουτροῖς παῖδα τὸν ἀμφίβολον).

Summary

> *Quamvis ad modum rari sint, difficile est tamen ut temporibus desint.*
>
> (Augustine, *De Civitate Dei* 16, 8)

In summary, let us reconsider the two major types of 'hermaphrodite' described in antiquity: the bisexual category, and unidirectional sex change (so far, female-to-male only). As I have shown, several short case studies (medical and non-medical), from across the period, have survived: complex descriptions, as well as the formulation of theories explaining the existence of such beings. Descriptions often focus more or less specifically on the genital parts: the physical appearance of the rest of the body often remains unclear. Newborns and adults with an ambiguous sex condition were considered as having 'qualities' of both male and female. Classification related to the male gender (as in *semiviri*, for example): the ideal orientation was male. Some ancient authors dispute the real existence of the bisexual type with two sets of genitals. In ancient Greece and especially in the Roman Republic, hermaphrodites were regarded as a serious and bad sign from the Gods (*progidium*), often in times of war or crisis. In real life, they were outlawed and eventually put to death. There is an obvious, long-lasting discrepancy between the idealising mythological-artistic image and the recurrent reality of annihilation. In the Roman Empire, at least from 1 CE onwards, hermaphrodites were socially and legally integrated, but in fact remained hidden outsiders (*delicia*).

5. Contemporary Views of Intersex

I have not presented any pictures of intersex persons here, since in recent times the people concerned have criticised the shamelessly pornographic style of some medical photographs; pictures often show the whole person naked, or just the individual external genitals in close-up, with details that are only relevant to the (medical) expert. To the layman, they may appear as curious as repulsive.[105]

The scientific community no longer believes in wonders, and explains anomalies in the newborn and the adolescent in biomedical terms. In

105 Plattner (2008) 15; Zehnder (2010) 393.

contemporary medical reality, intersex is not one single phenomenon.[106] Its division, based on the so-called gonadal state, into true hermaphroditism[107] and pseudo-hermaphroditism (male and female),[108] is now outdated. It was abandoned because of its over-simplicity and the increasingly negative impression it made on the patient.[109] Since 2005–2006, intersex states in humans have borne the initials DSD ('disorders of sex differentiation').[110] DSD itself is in fact not a real medical diagnosis; it is rather an auxiliary construct or rubric, summarising a variety of medical diagnoses or intersex syndromes. Classification starts with an analysis and description of the chromosomes, of which the complete number is normally 46. It then proceeds according to the presence or absence of the sex (gonosomal) chromosomes (XX, XY), followed by known defects in other (autosomal) chromosomes, in hormones (deficit, overproduction), in the anatomical state (external and internal), and eventually in specific molecular markers (e.g., cellular receptor defects). It is notable that today many genital variants (micropenis, absence of penis, clitoromegaly, uterovaginal anomalies) and hitherto excluded syndromes such as Turner's (45X0 and variants), Klinefelter's (47XXY and variants) and cloacal exstrophy are also included.[111] DSD, taken as a whole, is in fact a rare congenital anomaly. It is estimated today to occur in 1 in 5,000 liveborns (ca. 0.018% of all newborns). In Germany nearly 10,000 persons live with DSD, and about 150 children with DSD are born every

106 Zehnder (2010) 348: "Für die Medizin scheint Intersexualität also nur virtuell zu existieren und kein einheitliches Phänomen zu sein, über welches man global sprechen kann".

107 Involving either both gonads, or mixed gonads.

108 Male pseudo-hermaphroditism presents internal male genitals with external feminising; female pseudo-hermaphroditism presents internal female genitals with external virilising: Holm (1998) 60; Sinnecker (2002) 174.

109 Hiort (2007) 100; Zehnder/Groneberg (2008) 3–5. The adults concerned are now seeking more neutral, non-medical, non-pathological, and non-mythological self-descriptions; they reject even 'intersex' and the German *Zwitter*. The ancient mythological term 'hermaphrodite' was originally (re)introduced into teratology by the anatomist Johann Friedrich Meckel the Younger (1781–1833); Clark (1969) 318.

110 This follows the results of interdisciplinary but medically dominated Chicago Consensus Conference of 2005: Hiort (2007) 100. Even within the interdisciplinary dialogue of professionals there has been no real consensus until now: Zehnder, Groneberg (2008) 5. The term 'disorder' is disputed by people involved, who prefer the neutral description "differences in sex orientation". Mirjam Werlen, a Swiss jurist, has proposed the term "biological gender variation syndromes" (BGV): see Werlen (2008) 179, note 2.

111 Hiort (2007) 101. This is sometimes not very helpful in clinical practice, because well-known problems in some syndromes with their own external genital features are needlessly transferred to the intersex complex.

year.[112] One third of all newborns with DSD will have at least one further anomaly or syndrome. Medicine has produced morphological, 'phenotypical' systems of description based on external and internal anatomical genital findings, in order to compare them. In medical practice this classification involves a simplification of complex and individual morphologies that are difficult to describe, even now.[113] Even using all available modern diagnostic tools (sonography, radiography, chromosomes, hormonal state, molecular markers, cystoscopy, genitoscopy, laparoscopy, laparotomy), only about 40% of all children classified as DSD will get a final medical diagnosis today.[114]

The most frequent XX-DSD is congenital adrenal hyperplasia, which causes virilisation in newborn females (or sometimes later) in varying degrees, from hypertrophy of the clitoris to totally male-shaped external genitalia.[115] These newborns were often classified as male in the past; most adults are fertile, but some not.[116] In 5-alpha-reductase deficiency, where the conversion of the hormone testosterone into dihydrotestosterone is defective, people become masculinised during puberty, with a gender change from female-to-male.[117] It has been speculated that this disorder explains ancient reports of female-to-male changes.[118] But 5-alpha-reductase deficiency is only one out of seven disorders as defined in medical terms today which *all* cause virilisation of some form or other in formerly female subjects.[119] Some cases of XY-DSD involve an innate resistance, complete or incomplete, to androgens. Individuals with complete resistance (CAIS, Complete Androgen Insensitivity Syndrome) are not physically distinguishable

112 Sax (2002); Hiort (2007) 100–101. These numbers remain disputed: see the critical discussion in Zehnder (2010) 139–141.

113 Hiort (2007) 103.

114 Rothärmel (2006) 275; Hiort (2007) 103.

115 Formerly classified as 'female pseudohermaphroditism': Holm (1998) 61; Sinnecker (2002) 188–189.

116 Zehnder (2010) 82. Today, children with congenital adrenal hyperplasia (CAH) usually are detected by standard screening of all newborns. Some CAH individuals suffer from a life-threating hormonal deficiency associated with excessive loss of body salt: Holm (1998) 61–64.

117 Sinnecker (2002) 174.

118 Charlier (2008) 294: "Ce syndrome semble correspondre aux anecdotes de ces femmes changées en homes après un intervalle libre, chez qui apparaissent une verge et une barbe."

119 Sinnecker (2002) 174–192: 5-alpha-reductase deficiency, incomplete gonadal dysgenesia, StAR-protein deficiency, 3-beta-hydrosteroid-dehydrogenase deficiency, CYP17 deficiency (2 known forms), 17-betahydroxysteroid dehydrogenase deficiency, steroid-5-alpha-reductase type 2 deficiency, ovotestis ("true hermaphroditism").

from 'normal' XX-women from birth onwards; they develop female breasts in adolescence, but are all infertile.[120]

In Germany, the recommendation is now that every newborn with DSD receives an official, unequivocal gender identity (male or female), on the basis of a thorough discussion between the parents and a team of experts.[121] Intersex had vanished from German law after 1900; it was officially absent from the German Civil Code, the *Bürgerliches Gesetzbuch*.[122] And from the 1950s, intersex persons vanished from public view, as a result of surgical-psychological measures; this was the so-called 'optimal gender policy,' involving genital corrective surgery, binary gender assignment, and the concealment of this information from patients.[123] Since the 1990s, intersex persons have been re-emerging into the public space through patients' networks; intersex has now become a highly disputed, 'hot' topic in various disciplines, while the former policy is viewed as genital mutilation and present-day scientific theories are in question.

Today's medical theory and practice of intersex has nevertheless been conditioned by technical feasibilities (surgery), modern sexual psychology, and the mid-twentieth-century socio-cultural context. The legitimacy of medical practices was not questioned at all, regardless of whether the physicians involved wanted actively to harm their patients.[124] Meanwhile, however, the hormonal and even the chromosomal model of sex has broken down and been revealed as a simplification: so-called male or female hormones occur in both men and women; there is no solid division in XX or XY states, since there are XXY and XY states involving the loss of some parts of the Y chromosome, as well as chromosomal mosaicisms. Even the development of the individual's sex on a molecular basis is far more complex than once it seemed. The classical binary or bipolar sex model is ripe for social and biological deconstruction.[125]

The major question today is: must a child born with this rare phenomenon of intersex really be adapted, medically and surgically, to the dimorphic,

[120] Zehnder (2010) 83.

[121] Hiort (2007) 104.

[122] Wacke (1989) 872. A recent official commentary in the Civil Code states that any entry in the birth documents other than male or female is forbidden: Rothärmel (2006) 275; Stern (2010) 37–38. Before 1900, the entry *Zwitter* was officially allowed.

[123] Zehnder (2010) 383.

[124] Neumann (2008) 52.

[125] Stern (2010) 25. For a very broad overview on this topic, see Klöppel (2010) and Voss (2010).

binary sex state of 99 % of people?[126] Contemporary biomedicine still sees intersex as a social stigma that has to be corrected. This exclusiveness of medicine and psychology is now highly disputed, mainly by the individuals concerned, on ideological grounds that are either constructivist, essentialist or reductionist.[127] Medicine on its own, with its urge to diagnose, to heal, and to act out of a biomedical framework, appears too unilateral, and tends to be circular and reductionist; hence the medical profession is being asked to abandon its exclusive power to decide about intersex newborns.[128] The focus is shifting to the very special personal needs of each human with intersex, and their personal life-stories are at the centre of investigation. Scientifically, intersex has become a transdisciplinary topic that includes the juridical, social, medical, psychological and individual aspects of the lives concerned.[129] In recent discussions a new, 'heteronormative' approach is favoured: intersex persons and their relatives are encouraged, psychologically and socially, to reinterpret their difference positively, as vital resource, and to emphasise their exceptional status.[130]

6. Hermaphrodite = DSD?

The crucial question is: can we equate modern DSD with the ancient type of hermaphrodite? Any ordinary physician will usually answer that there have been hermaphrodites in all times. Nevertheless, my own answer to this major question is: no. In my view, this kind of equation is more than a simplification, it is a serious mistake. The ancient category of the hermaphrodite remains far too equivocal. On the other hand, the modern classification and concepts of DSD also remain equivocal. Modern DSD includes even more phenomena than before, and covers newly defined disorders. At the same time, modern medical classification is a form of simplification related to international medical practice, making for manageable comparisons across the broad spectrum between normal and pathological difference. The only similarity

126 Zehnder, Groneberg (2008) 6. There are of course some medical conditions where treatment is obligatory: e.g., life-threatening hormonal deficiency, carcinogenesis in malformed internal genitals.

127 Zehnder/Groneberg (2008) 8.

128 Groneberg (2008) 134.

129 Zehnder/Groneberg (2008) 4.

130 Zehnder (2008) 43–45. There are some similarities to discussions about 'black' and 'white' people: see Becker (2005).

between the concepts of 'hermaphrodite' in antiquity and intersex in modern times is perhaps that people with ambiguous genital conditions have been annihilated, over a long period of history.

7. The Result: New Possibilities for Learning

We do not really know what the ancient Greeks and Romans truly meant by the ἑρμαφρόδιτοι, *androgyni* and *semimares* of their time, and we shall never know exactly. From the ancient framework of gender, both explicit and implicit, we can guess that they most frequently recognised sex differences in terms of the dual mode. And today's historical interpreter is only able to encompass the variety of possibilities of intersex by projecting his own recent views of it into that specific past. This yields no more than a relative approximation, as a way of achieving a simple and common understanding. Finally, it remains a circular argument. Moreover, recent views of intersex are too fluid and unspecific; they have changed rapidly over the last decade, and will clearly change again in the future, by deconstructing their hitherto strictly medical content. Following recent developments, mainly from 'intersex' people themselves, we may be seeing a paradigmatic shift: the introduction of a 'third sex' is a possibility, legally, medically, and socially. Our look back into history therefore reminds us that the idea of an unchanged phenomenon of equivocal, undeterminable sex status is fragile too. Intersex, just like the idea of a bipolar sex order in nature, is a theoretical, socially grounded construct without any need of real existence: it is itself contingent. Despite this, we should not overemphasise social constructionist and deconstructionist views. Practical medicine requires at least some degree of simplification by categorisation, and a treatment-oriented theoretical baseline on which comparisons can be made.[131] In my view, the only constant *topos* in congenital undetermined sex conditions is the human reaction: disruption of the dual mode of sex and gender by 'intersex' causes discomfort and fear, and the awareness of contingency induces deep-seated fears and insecurities. It is this that generates the urge to erase the 'problem': in antiquity by drowning (on religious grounds), in modern times by hiding it in clinics and equalising differences by surgery (on social grounds).[132] Progress, in modern terms,

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131 Sax (2002) 177.

132 Medicine and psychology in the 20th century have diminished contingency by erasing almost all intersex persons surgically from the community, thus perpetuating the simplistic and reductionist model of binary gender in modern Western societies: Zehnder (2008) 46.

can be found in the toleration, acceptance and integration, both pragmatic and paradigmatic, of the 'normality of difference'[133] and the heterogeneity of nature, accepting the individual's right to choose the social role in which they wish to live their life.[134]

The experience of contingency can thus be undergone by demonstrating the historicity of medical retrospective diagnosis; contingency reiterates itself in the special example of the 'hermaphrodite'. But do teachers really have the ability to teach all this to contemporary medical students and even school pupils?[135] The example of retrospective diagnosis is a powerful tool for teaching contingency. Let me close with a remark from a putatively intersex person from an internet forum about intersex newborns today, which within the scope of the discussion above may by now seems rather circular: 'Children are not born with equivocal sex characteristics into this world, they were born unequivocally as hermaphrodite!'[136]

Literary Sources of Tables

Sources Table 1

Phlegon, *De Mirabilibus* 2, 3 (314/3 BCE, ghost story in Aitolia):[137] παιδίον αἰδοῖα ἔχον δύο, ἀνδρεῖόν τε καὶ γυναικεῖον, καὶ τὴν φύσιν θαυμαστῶς διηλλαγμένον· τὰ μὲν ἄνω τοῦ αἰδοίου ὅλως σκληρά τε καὶ ἀνδρώδη ἦν, τὰ δὲ περὶ τοὺς μηροὺς γυναικεῖα καὶ ἁπαλώτερα.

Livy, *Ab Urbe condita* 27, 11, 4 (209 BCE): natum ambiguum inter marem ac feminam sexu infantem.

Livy, *Ab Urbe condita* 27, 37, 6 (207 BCE): liberatas religione mentes turbavit rursus nuntiatum Frusinone natum esse infantem quadrimo parem nec magnitudine tam mirandum quam quod is quoque, ut Sinuessae biennio ante, incertus mas an femina esset natus erat.[138]

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133 Zehnder (2008) 47.

134 Groneberg (2008) 139.

135 Compare the ongoing debate in France: H. Sonnberger, Sexualkunde-Streit in Frankreich seen on [http://www.spiegel.de/schulspiegel/0,1518,784113,00.html; received on 03.09.2011]; P. Picq, Le sexe n' est pas que construction, *Le Monde*, 04.09.2011

Seen on [http://www.lemonde.fr/imprimer/article/2011/09/03/1567378.html; received on 03.09.2011].

136 German Ethical Council: http://diskurs.ethikrat.org/2011/06/kinder-haben-rechte/#more-570 (the commentary by "Reno", 21.06.2011). See now the recent official account on "intersex": seen on http://www.ethikrat.org/dateien/pdf/stellungnahme-intersexualitaet.pdf.

137 See Hansen (1996) 85–101; date: see discussion in Brisson (1997) 136.

138 Engels (2007) 476 speculates that the hermaphrodite of 209 was not killed, but relocated in 207 as a nearly 4-year-old child and then—because of the prevailing political situation—eliminated. Charlier (2008) 277, however, notes that the described newborn could have been a

Livy, *Ab Urbe condita* 31, 12, 6–8 (200 BCE): foeda omnia et deformia errantisque in alienos fetus naturae visa: ante omnia abominati semimares iussique in mare extemplo deportari, sicut proxime C. Claudio M. Livio consulibus deportatus similis prodigii fetus erat.

Livy, *Ab Urbe condita* 39, 22, 5 (186 BCE): sub idem tempus et ex Umbria nuntiatum est semimarem duodecim ferme annos natum inventum.

Obsequens, *Liber Prodigiorum* 3 (186 BCE): semimas duodecim ferme annorum inventus

Obsequens, *Liber Prodigiorum* 22 (142 BCE): Lunae androgynus natus (= Orosius 5, 4, 8–9).

Obsequens, *Liber Prodigiorum* 27a (133 BCE): In agro Ferentino androgynus natus.

Phlegon, *De Mirabilibus* 10 (125 BCE): Ἐγεννήθη καὶ ἐπὶ Ῥώμης ἀνδρόγυνος, ἄρχοντος Ἀθήνησιν Ἰάσονος, ὑπατευόντων ἐν Ῥώμῃ Μάρκου Πλαυτίου [καὶ Σέξτου Καρμινίου] Ὑψαίου καὶ Μάρκου Φουλβίου Φλάκκου.

Obsequens, *Liber Prodigiorum* 32 (122 BCE): In foro Vessano androgynus natus.

Obsequens, *Liber Prodigiorum* 34 (119 BCE): androgynus in agro Romano annorum octo inventus.

Obsequens, *Liber Prodigiorum* 36 (117 BCE): Saturniae androgynus annorum decem inventus.

Obsequens, *Liber Prodigiorum* 47 (98 BCE): Item androgynus in mare deportatus.

Obsequens, *Liber Prodigiorum* 48 (97 BCE): Supplicatum in urbe quod androgynus inventus et in mare deportatus est.[139]

Obsequens, *Liber Prodigiorum* 50 (95 BCE): Androgynus Urbino natus

Obsequens, *Liber Prodigiorum* 53 (92 BCE): Arretii duo androgyni inventi[140]

Tacitus, *Annales* 12, 64, 1–3 (54 CE): Biformis hominum partus et suis fetum editum cui accipitrum ungues inessent. ("It was stated that hermaphrodites had been born, and that a pig had been produced with the talons of a hawk"; transl. Jackson).

Sources Table 2

Livy, *Ab Urbe condita* 24, 10, 10 (214 BCE): ex muliere Spoleti virum factum

Pliny, *Naturalis Historia* 7,36 [= Aulus Gellius, *Noctes Atticae* 9, 4, 15] (171 BCE)

Ex feminis mutari in mares non est fabulosum. Invenimus in annalibus P. Licinio Crasso C. Cassio Longino cos. Casini puerum factum ex virgine sub parentibus iussuque haruspicum deportatum in insulam desertam.

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stillbirth (intrauterine death), with distinct edema and maceration which may have affected the genital parts too, making them unidentifiable.

139 The story is a double of Obsequens 47; Sartori (1993) 19, Engels (2007) 576.

140 In Obsequens 53 there is also reported of a *mulier cum duplici naturae*; Engels (2007) 579 speculates that this woman was a hermaphrodite, too, and that this report maybe equals the story of a hermaphrodite found in Rome at the begin of the Social War in Diodorus Siculus 32, 12, 2. Besides, in Obsequens 53, there is the report of a boy with no opening (urethra?) in his *natura* (*puer ex ancilla natus sine foramine naturae qua humor emittitur*) which medically could be interpreted as a severe form of hypospadia (or even any congenital adrenal hyperplasia), today included in the diagnosis complex of DSD.

Diodorus Siculus 32, 10, 2–10 (ca. 145 BCE)
Diodorus Siculus 32, 11, 1–4 (30 years later = ca. 115 BCE)
Diodorus Siculus 32, 12, 2 (at begin of the Social War = ca. 90 BCE)[141]
Pliny, *Naturalis Historia* 7, 36: Licinius Mucianus prodidit visum a se Argis Arescontem, cui nomen Arescusae fuisse, nupsisse etiam, mox barbam et virilitatem provenisse uxoremque duxisse.
Pliny, *Naturalis Historia* 7, 36: [Licinius Mucianus prodidit] eiusdem sortis et Zmyrnae puerum a se visum.
Pliny, *Naturalis Historia* 7, 36 (ca. 50 CE = lifetime of Plinius): Ipse [= Plinius] in Africa vidi mutatum in marem nuptiarum die L. Consitium, civem Thysdritanum.
Phlegon, *De Mirabilibus* 6 (45 CE): Καὶ ἐν Ἀντιοξείᾳ δὲ τῇ πρὸς Μαιάνδρῳ ποταμῷ ἐγένετο ἀνδρόγυνος, ἄρχοντος Ἀθήνησιν Ἀντιπάτρου, ὑπατευόντων ἐν Ῥώμῃ Μάρκου Βικινίου καὶ Τίτου Στατιλίου Ταύρου, τοῦ Κουρβίνου ἐπικληθέντος.
Phlegon, *De Mirabilibus* 7 (53 CE): Ἐγένετο καὶ ἐν Μηουνίᾳ, πόλει τῆς Ἰταλίας, ἐν Αγριππίνης τῆς Σεβαστῆς ἐπαύλει ἀνδρόγυνος, ἄρχοντος Ἀθήνησιν Διονυσοδώρου, ὑπατευόντων ἐν Ῥώμῃ Δέκμου Ἰουνίου Σιλανοῦ Τορκουάτου καὶ Κοΐντου Ἁτερίου Ἀντωνίνου. Φιλωτὶς γάρ τις ὀνόματι παρθένος, Σμυρναία τὸ γένος, ὡραία πρὸς γάμον ὑπὸ τῶν γονέων κατεγγεγυημένη ἀνδρί, μορίων αὐτῇ προφανέντων ἀρρενικῶν ἀνὴρ ἐγένετο.
Phlegon, *De Mirabilibus* 8 (53 CE): Καὶ ἄλλος δέ τις ἀνδρόγυνος κατὰ τοὺς αὐτοὺς χρόνους ἐγένετο ἐν Ἐπιδαύρῳ, γονέων ἀπόρων παῖς, ὅς ἐκαλεῖτο πρότερον Συμφέρουσα, ἀνὴρ δὲ γενόμενος ὠνομάζετο Συμφέρων, κηπουρῶν δὲ τὸν βίον διῆγεν.
Phlegon, *De Mirabilibus* 9 (116 CE; lifetime of Phlegon): Καὶ ἐς Λαοδίκειαν δὲ τῆς Συρίας γυνή, ὀνόματι Αἰτητή, συνοικοῦσα τῷ ἀνδρὶ ἔτι μετέβαλε τὴν μορφὴν καὶ μετωνομάσθη Αἰτητός ἀνὴρ γενόμενος, ἄρχοντος Ἀθήνησιν Μακρίνου, ὑπατευόντων ἐν Ῥώμῃ Λουκίου Λαμία Αἰλιανοῦ καὶ ⟨Σέξτου Καρμινίου⟩ Οὐέτερος. τοῦτον καὶ αὐτὸς ἐθεασάμην.

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141 According to Engels (2007) 579 this story is maybe identical with the report in Obsequens 53 of a woman with double private parts (*mulier duplici natura inventa*) which Engels interprets as hermaphrodite. Brisson (1997) 142, n. 60, denies any identification of Diodorus's report with one of the two *androgyni* found in Arretium in 92 BCE as reported by Obsequens (Obsequens 53).

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WHAT'S IN A MONSTER? PLINY THE ELDER, TERATOLOGY AND BODILY DISABILITY

Bert Gevaert and Christian Laes

1. Introduction

As Emma-Jayne Graham rightly states in this volume, studies of ancient disability, and especially of the Roman world, have often focused on 'monstrous' or extremely deformed bodies in both the mortal and divine communities (cf. p. 250). Indeed, from the beginnings of time people have considered monsters to be *tremendum et fascinans*, fascinating mankind but also frightening it. In the western world alone, a teratological history would need to cover the Old Testament's terrifying sea-creature Leviathan, a Greek mythology full of hideous and terrible creatures, ancient Romans' preoccupation with monstrous births, medieval people's constant awareness of the Devil and his minions, the references by New World travellers like Marco Polo to people with the heads of dogs or strange creatures, 'scientific' approaches to monstrous beings in modern medicine, biological and 'racist' categorisations in the nineteenth and the early twentieth century, and even present-day fantasy games, books (Harry Potter!) and television series—not to mention cryptozoology, a 'science' that studies hidden creatures such as the Loch Ness monster or the Yeti, unrecognised by 'serious' scientists. Such overviews have been around for a long time, and a mere enumeration of all the strange creatures distinguished by the Roman world is obviously not the aim of the present chapter.[1]

Instead, this contribution is a case study, highlighting the concept of strange or miraculous creatures and monsters in the natural history of

[1] General teratological histories in the western world include Mancini and Fravega (1963); Duvic (1973); Martin (2002). For Antiquity, see Atherton (2000); Charlier (2008). For the Middle Ages, see Jarnill (2003); Jones, Sprunger (2002). For the modern era, see Schmutz (1997) and Van Hee (2011). On the nineteenth and twentieth centuries, see Gray (2004) and Van Houdt (2011). References to studies on monsters in the Graeco-Roman world will be included in the subsequent footnotes. Lenfant (1999) and Chappuis Sandoz (2008) have been of fundamental importance for this study.

Gaius Plinius Secundus, better known as Pliny the Elder (23–79 CE). This Roman aristocrat, army officer and encyclopaedist had a marked interest in the wonders of nature. In his encyclopaedia, spanning 37 volumes, one encounters a variety of *mirabilia*, ranging from the special powers of precious stones, trees and plants to all sorts of strange creatures and exotic human beings.[2] In the context of the present volume, several interesting questions arise:

(1) How does Pliny's concept of the monster or miraculous human being fit alongside the categorisations made by other ancient writers?
(2) Can we be more precise about the rationale behind his own classifications in books six and seven?
(3) To what extent do his distinctions relate to what we would label today as physical handicaps?
(4) Does the attention he pays to this topic reveal something about the mentality of the period in which he lived?
(5) Might his distinctions have changed the way physically disabled people were viewed at the time—or even the way they viewed themselves?

2. Latin Terminology on Monsters

In what is considered one of the highlights of Flemish literature in recent decades, Tom Lanoye's trilogy *Het Goddelijk Monster, Zwarte Tranen* and *Boze Tongen* ('The Divine Monster,' 'Black Tears' and 'Evil Tongues', 1997–2002) portrays the life of a young woman, Katrien Deschryver, whose physical beauty is alleged to combine with moral depravity. She is blamed for several ferocious accidents which strike her family. Ultimately she takes upon herself the guilt constantly imposed on her by her family: she sets fire to herself, only to survive as a mutilated human being. The divine monster has become a 'real' monster, her moral depravity portrayed in her badly damaged face.[3]

In this single example from present-day literature, it is already clear how the term 'monster' can cover a wide range of meanings, applied in a rather loose way but always pointing to a certain trangression of moral or physical

[2] Needless to say, the scholarship on Pliny the Elder is vast. For excellent overviews relevant to the theme of this paper, see Köves-Zulauf (1978); Kádár, Berényi-Révész (1986); Serbat (1986); Murphy (2004); Beagon (2005). On the subject of monsters in Pliny the Elder, see particularly Bénabou (1975); Chappuis Sandoz (2008).

[3] Lanoye (1997); (1999); (2002).

norms. The same goes for the word's Latin usages.[4] Creatures we would immediately think of as monsters may indeed be called such in Latin: the grammarian Charisius mentions the Minotaur in this context, and poets often refer to species such as the Cyclops or the Giants.[5] But *monstrum* and its synonyms can also be used to describe individual ugly people, or strange animals.[6] With the Emperor Claudius it comes close to denoting a disabled person, as is also the case in references to the birth of deformed babies.[7] The morally ugly, too, are sometimes called *monstra*. The most famous, without a doubt, is Cleopatra, whom Horace calls *fatale monstrum*. Suetonius called Caligula *monstrum* because of his horrible deeds; the activity of bone breakers (*ossifragi*), who turn people into beggars by mutilating them, is also called monstrous.[8] In a letter of Pliny the Younger, his friend Julius Genitor is said to have labelled vulgar table entertainers (*cinaedi* or *moriones*) as *prodigia*.[9] Hence *monstrum* can be used as an insult. Terence calls a castrated slave *monstrum hominis*.[10] Just as in the Lanoye trilogy, people can *become* monsters, by being mutilated.[11]

The ancient Romans also use a quite confused terminology to indicate strange happenings that may foretell the future: *ostentum*, *portentum*,

4 There is excellent analysis in Allély (2003) 134; Cuny-Le Callet (2005) 43–54; Garland (2010) 4. Szantyr (1990) remains the starting point for terminological analysis. Some thoughts on possible ancient definitions can also be found in Charlier (2008) 23–44. See also Cherubini (2012).

5 Charisius, *Ars* p. 389, 4 (ed. Keil); Virgil, *Aeneis* 3, 658 (Polyphemus); Ovid, *Fasti* 5, 35 (Giants).

6 Martial, *Epigrammata* 7, 38 (two ugly slaves are called *fera monstra*); 7, 87 (a dog, snake, fox and other animals are described as *monstra*). Isidorus of Seville, *Origines* 11, 3, 5 (a creature who is half-man half-beast).

7 Suetonius, *Claudius* 3 (a mother calls her little son *portentum hominis*); Seneca, *Apocolocyntosis* 5, 1–3. On Claudius as a monster, see also Laes, pp. 163–167 in this volume. Quintilian, *Institutio oratoria* 5, 12, 19 (birth of a *spado*); Firmicius Maternus, *Mathesis* 7, 7, 2; Augustine, *Enchiridion* 22, 87 (monstrous births). Even 'normal' babies could be somehow regarded as monsters, see Gourevitch (1995) 239–260.

8 Horace, *Odes* 1, 37; Suetonius, *Gaius* 22; Seneca the Elder, *Controversiae* 10, 4, 3 (note that the mutilated beggars themselves are not labelled as *monstra*). Also, the sexual lust for *eunuchi* is called *monstrosa voluptas* in *Anthologia Latina* 108. Would this imply that eunuchs were considered *monstra*? Or is it called *monstrosa voluptas* because the epigrammatist considers the pleasure unnatural? The texts on this remains ambiguous.

9 Pliny, *Epistulae* 9, 17, 3.

10 Terence, *Eunuchus* 696. See Cuny-Le Callet (2005) 82–93 for the use of the word as an insult.

11 Seneca, *De Ira* 3, 17, 4 (*factusque poena sua monstrum*) on Telesphorus who had his eyes and ears cut off. The word is never used in the case of war veterans; see Laes (2011) and Samama in this volume.

prodigium, *miraculum* and indeed *monstrum*.[12] Cicero uses the language of previous generations to indicate strange phenomena in nature; and his contemporary, the great encyclopaedist Varro, always fond of etymological explanations, seems to diverge from Cicero only on minor linguistic points:

> Quia enim ostendunt, portendunt, monstrant, praedicunt, ostenta, portenta, monstra, prodigia dicuntur.
>
> Because they show (*ostendunt*), predict (*portendunt*), indicate (*monstrant*), forecast (*praedicunt*), they are called *ostenta, portenta, monstra, prodigia*.
>
> Cicero, *De divinatione* 1, 93

> Ostentum, quod (…) ostendit, portentum, quod (…) portendit, prodigium, quod porro dirigit, miraculum, quod mirum est, monstrum, quod monet.
>
> *Ostentum*, because (…) it shows something, *portentum*, because (…) it predicts, *prodigium*, because it leads us further into the future, *miraculum*, because it is a wonder, *monstrum*, because it shows us something.
>
> Varro apud Servium, *In Aeneidem* 3, 366

Each of these terms seems to have been used in religion to denote infraction of 'the normal order of things',[13] and in connection with fortune telling and divination; the usage is attested until late Antiquity.[14] They can be used to indicate all kinds of strange phenomena in nature (blood-soaked rain, strange lightning, flaming shields in the sky), and the birth or appearance of 'strange' and anomalous human creatures, or accidents which turn out to have been predictions of a future condition.[15]

Apart from its religious and the philosophical/theological connotations, one might expect *monstrum* and related terms to be defined in juridical texts. In fact there are two passages doing so. Towards the end of the Digesta,

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12 The confused use of the terms is confirmed by Servius, *In Aeneidem* 3, 366: *prodigium, portentum et monstrum modico fine discernuntur sed confuse pro se plerumque ponuntur*. Isidore of Seville, *Origines* 11, 3, 5–6 mentions that monsters do not live long after birth. He also tries to distinguish between *portenta*, referring to transfiguration (the case of a woman who gave birth to a serpent), and *portentuosa*, pointing to a mild mutation, as in those born with six fingers.

13 Ancient authors, both pagan and Christian, agree to define the terms as denoting events *contra naturam*. See e.g. Charisius, *Ars* p. 389, 4 (ed. Keil); Tertullian, *De corona* 51, 33. All the relevant passages can be found in Szantyr (1990) k. 1446. See also Cuny-Le Callet (2005) 56–57.

14 For ancient definitions linking these words to religious portents, see Cicero, *De natura deorum* 2, 7; Nonius Marcellus, *De compendiosa doctrina* 429, 27 (ed. Lindsay); Augustine, *De Civitate Dei* 21, 8; Varro apud Servium, *In Aeneidem* 3, 366; Festus, *De verborum significatu* 138 (ed. Lindsay); Isidorus, *Origines* 11, 3, 3. Cuny-Le Callet (2005) 46–50 has a very useful discussion on the etymology of the various words as discussed by the ancient authors themselves.

15 Cuny-Le Callet (2005) 54–55. For enumerations of these various sorts of prodigies, see e.g. Cicero, *De natura deorum* 2, 13–14; Varro, *De agricultura* 2, 4; Tacit, *Annales* 12, 64.

Ulpian elaborates on the exact meaning of *ostentum*: to him, it denotes both 'unnatural' congenital appearances among humans, animals or plants, and prodigious events. With the word *factumque*, Ulpian leaves open the possibility that somebody or something can actually become an *ostentum* or be transformed into it.

> 'Ostentum' Labeo definit omne contra naturam cuiusque rei genitum factumque. Duo genera autem sunt ostentorum: unum, quotiens quid contra naturam nascitur, tribus manibus forte aut pedibus aut qua alia parte corporis, quae naturae contraria est; alterum, cum quid prodigiosum videtur, quae Graeci fantasmata vocant.
>
> Labeo defines the term 'prodigy' to mean everything which is born or produced contrary to nature. There are, however, two kinds of prodigies; one where something is born contrary to nature, for instance with three hands or feet, or with some other part of the body deformed; another, where something is considered to be unusual, and which the Greeks designate fantasmata (that is to say, apparitions). *Digesta* 50, 16, 38 Ulpian (transl. S.P. Scott)

While the original context of the first fragment is not entirely clear, the second discussion in Digesta 50 surely concerns the granting of *ius trium liberorum* in the case of the birth of a deformed child.[16]

> Quaeret aliquis si portentosum vel monstrosum vel debilem mulier ediderit vel qualem visu vel vagitu novum, non humanae figurae, sed alterius, magis animalis quam hominis, partum, an, quia enixa est, prodesse ei debeat? Et magis est, ut haec quoque parentibus prosint: nec enim est quod eis imputetur, quae qualiter potuerunt, statutis obtemperaverunt, neque id quod fataliter accessit, matri damnum iniungere debet.
>
> Where a woman brings forth a child that is deformed, or a monster, or defective, or which has something unusual in its appearance or its voice, and which has no resemblance to a human being, but seems to be rather an animal than a man, someone may ask, will it be any benefit to her to have brought such a creature into the world? The better opinion is, that consideration must be had for its parents, for they ought not to be censured, as they have done their duty as far as they could, nor should the mother be prejudiced, because an unfortunate occurrence has taken place.
> *Digesta* 50, 16, 135 Ulpian (transl. S.P. Scott)

Here, various concepts of congenital monstrosity are intertwined. The monster does not ressemble its parents, and looks (or sounds, cf. the word *vagitu* above) more like an animal than a human being.[17] Needless to say,

16 Gourevitch (1998).
17 Chappuis Sandoz (2008) 22 points to parallels with Aristotle, *De generatione animalium*

the definition remains rather open and vague. It seems to imply that hermaphrodites were not reckoned as monsters; after all, their appearance would be quite human. And it could provoke endless discussion in cases of babies with six fingers or the like.

On 17 November, 530, Emperor Justinian issued the following decree:

> Quod certatum est apud veteres, nos decidimus. Cum igitur is qui in ventre portabatur praeteritus fuerat, qui, si ad lucem fuisset redactus, suus heres patri existeret, si non alius eum antecederet et nascendo ruptum testamentum faciebat, si postumus in hunc quidem orbem devolutus est, voce autem non emissa ab hac luce subtractus est, dubitabatur, si is postumus ruptum facere testamentum potest. (1) Veteres animi turbati sunt, quid de paterno elogio statuendum sit. Cumque Sabiniani existimabant, si vivus natus est, etsi vocem non emisit, ruptum testamentum, apparet, quod, etsi mutus fuerat, hoc ipsum faciebat, eorum etiam nos laudamus sententiam et sancimus, si vivus perfecte natus est, licet ilico postquam in terram cecidit vel in manibus obstetricis decessit, nihilo minus testamentum corrumpi, hoc tantummodo requirendo, si vivus ad orbem totus processit ad nullum declinans monstrum vel prodigium.
>
> We have decided a point in dispute among the ancients. When a descendant, carried in the womb of its mother, was passed over, while he could, if he saw the light of day, be heir to its father, and no one else would have precedence over him, and it, by birth, would (ordinarily) have caused a testament to be broken, it was doubted whether if such posthumous child was indeed brought into the world, but died without emitting a sound, it could cause the testament to be broken. (1) The ancients were divided in their opinion as to what was to be said of the parents' will. The Sabinians thought that if the child was born alive, the testament was broken, though it uttered no sound, which too, would be true if it had been dumb. We commend their opinion and ordain that if it was born completely alive, though it died immediately after coming to this earth, or in the hands of the midwife, the testament will, nevertheless, be void, provided only that it arrived in this world as a human being and not as a monster or prodigy. *Codex Iustinianus* 6, 29, 3 (transl. F.H. Blume)

The issue here is the designation of posthumous children as heirs. In this fragment, the testamentary rights of such descendants seem to have been emphatically defended, with the exception of monstrous births, which are again not further defined but left to the assessment of the moment.

767a35–769b10 (monsters do not resemble their parents); 769b8–10 (they look more like animals than like human beings).

3. Plinian Classifications of Strangeness

Unsurprisingly, both *monstrum* and the other nouns denoting transgressions of the norm are frequently found in Pliny's encyclopaedia. However, not once does the scientist Pliny offer even a hint of a definition of *monstrum* or the like. Nor does he take the opportunity to discuss the concept when occasion does seem to arise, as when he mentions the poet Volcacius Sedigitus, born with six fingers on each hand, or Marcus Coranus, whose two daughters had a similar polydactyly. He simply mentions the phenomenon in passing, without any suggestion of contempt, deformity or even abnormality.[18]

In his famous seventh book, on anthropology, which is full of references to 'strange' human beings, he uses the assortment of words for strangeness listed in the previous section. Anthropophagous races such as the Scythian tribes, the Cyclopes and the Laestrygones are regarded as *gentes huius monstri*. Oriental monstrosities and curious customs are *miracula*. Strange races of mankind are *prodigia* and *miracula*. Hermaphrodites are *prodigia*, while a woman who gave birth to an elephant is ranked among the *portenta*. To be born feet foremost is *contra naturam*. When one twin remains in the womb while the other dies in premature delivery, the event is a *miraculum*. The misfortune of being a female born with the genitals closed up indicates *infausto omine*. Miraculous displays of strength are *prodigiosae ostentationis*.[19] Pliny is clearly familiar with the religious connotation of the terms; he acknowledges the predictive power of *omina*, most of which foretell of bad things to come.[20]

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18 Pliny the Elder, *Naturalis Historia* 11, 244. Today, polydactyly has an incidence of 1 in every 500 live births. Postaxial polydactyly is approximately 10 times more frequent in blacks than in whites: see Abel, McCarthy (2008). According to Cicero, *De natura deorum* 1, 92, having useless extra body parts was not beautiful, but it was not monstrous. However, a child born with two heads clearly indicated civil war: Cicero, *De divinatione* 1, 53. Augustine too, *De Civitate Dei* 16, 8, 2 considers having more than five digits on a hand or foot "too slight to be considered a serious aberration from the norm" (*et haec levior est quam ulla distantia*) (trans. E.M. Sanford and W.M. Green).

19 Pliny the Elder, *Naturalis Historia* 7, 9; 7, 21; 7, 32; 7, 34; 7, 45; 7, 47; 7, 69; 7, 83. Note that in several instances no word vilifying monstrosity is used, though the context implies that it might well have been considered as such. It is said that the grandfather of Crassus the triumvir never laughed: 'This temperament sometimes develops into a kind of rigidity and a hard, unbending severity of nature, and takes away the emotions natural to humanity (*affectusque humanos adimit*)' (*Naturalis Historia* 7, 79; transl. H. Rackham). In a way, this Crassus could be considered as a *miraculum*, but it is not explicitly said that he was a monster, *pace* Barton (1993) 181.

20 E.g. Pliny the Elder, *Naturalis Historia* 7, 33–35. A famous example is the story about the

However, *monstrum* and the other, adjacent terms that denote and vilify a transgression of norms never make up a clear category of their own in Pliny's work. For him, the real dividing-line is between strange human races or species (elaborated particularly in *Naturalis Historia* 6, 46–52 and 7, 6–32) and the marvels that occur among individual human beings.[21] While this latter category records all sorts of strange and bizarre instances (multiple births, heredity, fertility, menstruation, teeth, height, bodily strength, continence, vision, hearing, stamina, memory, virtue, happiness, old age and lifespan, accidents and much more: see *Naturalis Historia* 7, 33–215), the former are the so-called Plinian races, which became very popular in medieval times and later on. These miraculous human species can be divided into three kinds. First we have creatures with an anomalous bodily structure that combines both human and animal parts: famous examples are sirens (human-bird), (hippo)centaurs (human-horse), *cynocephali* (humans with dogs' heads). Secondly, races of entirely human creatures exist who have only one, anomalous human body part: *sciapodes* (creatures with only one foot, used as a parasol), *antipodes* (with their feet turned backwards), *astomi* (without mouths), *blemmyae* (headless), *androgyni* (with different sexual organs), and *monophthalmi* (one-eyed). Thirdly, Pliny describes creatures regarded as monstrous not just because their body parts vary but because they deviate wholly from some formal human standard. Pygmies are smaller than the 'normal' human size, Amazons do not live together with the rest of the human race, and cannibals eat human flesh. These are all interesting and seemingly logical distinctions, but we must point out that it is not Pliny himself who draws them. It is modern scholars who have tried to create some order in the chaos of the *homines monstruosi*. It comes as no surprise, therefore, that a variety of categorisations has been proposed and published.[22]

Why would Pliny have made this division between miraculous human races and individual marvels? Would he have sought to locate the monstrous

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ominous monster of Volterra in *Naturalis Historia* 2, 140, on which see Heurgon (1991) and Cherici (1994).

[21] Explicitly in Pliny the Elder, *Naturalis Historia* 7, 32: (...) *satis sit inter prodigia posuisse gentes. Hinc ad confessa in homine pauca.* In this article, we occasionally use the term 'race', while fully acknowledging the difficulty in using it of Antiquity, since the concept did not yet have the biological connotations it has from the eighteenth century onwards. See Isaak (2004).

[22] This division into three kinds is drawn from de Hond (2003), the division into two (hybrids and anomalies) from Lenfant (1999) 207, followed by Chappuis Sandoz (2008) 25–27. Chappuis Sandoz mentions other possible divisions in this passage.

races in the realm of the imaginary, thus making the reality of the individual instances more credible? To ask this question would be anachronistic, suggesting that Roman intellectuals could not possibly have believed in creatures as Centaurs, Amazons or Cyclops etc, when quite the contrary is true.[23]

Pliny does clearly believe the individual instances to have occurred. Sometimes he carefully records their existence: for example, the body 69 feet high found in Crete, in a mountain cleft by an earthquake; the man from Arabia named Gabbara, brought to Rome under the principate of Emperor Claudius, who was nine feet nine inches tall; or the male dwarf Conopas (who measured only two feet five inches) and the very small Andromeda, the former a pet of Augustus' granddaughter Julia, the latter a freedwoman of Julia Augusta.[24] Sometimes we do find descriptions of monsters that seem to have escaped from their mythological cage, such as a hippocentaur that was conserved in honey and brought to the emperor Claudius, as described by Pliny and by Phlegon of Tralles. Cicero even writes about a discovery of the head of the infant god Pan in the quarries of Chios. One can also read many references to the birth of monstrous children (many of these are mentioned by the fourth-century author Julius Obsequens, in his *Book of Prodigies*).[25] Clearly, Pliny did not opt for the rationalising stance taken by Cicero in his *De Fato* or to a much stronger degree by Lucretius.[26] Just like the ancient philosophers and theologians, Pliny fully acknowledges the possibility of the existence of monsters.[27] He is rather ambiguous about whether

23 Cuny-Le Callet (2005) 165–185 analyses a wide range of texts by Cicero, Lucretius and Pliny on the possible existence or denial of hybrids and other exotica, and also on the persistent fears and superstitions of the Roman upper classes.

24 For these and other recorded instances, see Pliny the Elder, *Naturalis Historia* 7, 74–75. In the Cretian example, Pliny is most probably referring to a fossil finding. On fossil hunting in Antiquity, see Mayor (2000). Augustus' granddaughter Julia was said to be a collector of Giants' bones: Suetonius, *Augustus* 72.

25 Pliny the Elder, *Naturalis Historia* 7, 35 and Phlegon of Tralles, *Mirabilia* 34; Cicero, *De divinatione* 1, 13. For all cases of prodigious births, see the lists in Allély (2003) and (2004) as well as the contribution by Lutz Graumann in this volume.

26 On Cicero's *De Fato*, see the analysis by Cuny-Le Callet (2005) 137–143. According to Cicero, *monstra* are not *praeter naturam*, only *praeter consuetudinem*. There is, after all, a reasonable explanation for their occurrence. Lucretius, *De rerum natura* 2, 700–709 and 4, 732–743 denies the possible existence of hybrids or mythological monsters, which he ranks among the *simulacra*. See Chappuis Sandoz (2008) 33–34.

27 Aristotle, *De generatione animalium* 796b30–34, on which see Garland (2010) 149. Strabo calls writers who believe in monstrous races liars (Strabo, *Geographica* 2, 19). Gellius, *Noctes Atticae* 9, 4 was filled with disgust while reading such authors, and also blames Pliny the Elder for believing in monstrous races. Augustine, *De Civitate Dei* 16, 8 states that we do not

this means that every reported instance is actually 'true', but he does not exclude the possibility that they are real:

> naturae vero rerum vis atque maiestas in omnibus momentis fide caret, si quis modo partes eius ac non totam complectatur animo. (…) Iam in facie vultuque nostro cum sint decem aut paulo plura membra, nullas duas in tot milibus hominum indiscretas effigies existere, quod ars nulla in paucis numero praestet adfectando! nec tamen ego in plerisque eorum obstringam fidem meam potiusque ad auctores relegabo, qui dubiis reddentur omnibus, modo ne sit fastidio Graecos sequi, tanto maiore eorum diligentia vel cura vetustiore.
>
> Indeed the power and majesty of the nature of the universe at every turn lacks credence if one's mind embraces parts of it and not the whole. (…) Again though our physiognomy contains ten features or only a few more, to think that among all the thousands of human beings there exist no two countenances that are not distinct—a thing that no art could supply by counterfeit in so small a number of specimens! Nevertheless in most instances of these I shall not myself pledge my own faith, and shall preferably ascribe the facts to the authorities who will be quoted for all doubtful points: only do not let us be too proud to follow the Greeks, because of their far greater industry or older devotion to study.
>
> Pliny the Elder, *Naturalis Historia* 7, 7–8 (transl. H. Rackham)

> Haec atque talia ex hominum genere ludibria sibi, nobis miracula ingeniosa fecit natura. Ex singulis quidem quae facit in dies ac prope horas, quis enumerare valeat? ad detegendam eius potentiam satis sit inter prodigia posuisse gentes.
>
> These and similar varieties of the human race have been made by the ingenuity of Nature as toys for herself and marvels for us. And indeed who could possibly recount the various things she does every day and almost every hour? Let it suffice for the disclosure of her power to have included whole races of mankind among her marvels.
>
> Pliny the Elder, *Naturalis Historia* 7, 32 (transl. H. Rackham)

In this acceptance of 'oddities of nature', Pliny does not stand alone: a wide range of scholars and travellers can be cited, ranging from Marco Polo (1254–1324) to the sixteenth-century Zurich doctor Conrad Gesner, who claimed to have seen a cynocephalos; the French surgeon Ambroise Paré, who published 33 drawings of monsters in 1573; and the eighteenth-century

have to believe in all the types of men that are reported to exist; nevertheless, all creatures, however strange they may seem to us, are to be considered creations of God. On the theological discourse of deformity, see Kelley (2009).

Jesuit missionary Joseph François Lafitau, who saw an American acephalos which he firmly believed to be human.[28]

If it was not the possibility of actual existence that distinguished strange human races from the peculiarities of individual human beings, where exactly did the line of demarcation (which Pliny never explicitly mentions) lie? The criterion was surely heredity: that is to say, in the monstrous races, which invariably had their origin in faraway regions, the anomaly was a collective feature. The children were just as anomalous as their parents. In whole monstrous races, it would not be the case that parents failed to recognise their child and therefore considered it a *monstrum* (cf. *supra* p. 216).[29]

4. Pliny and His Time

Further on in this volume, Alexandre G. Mitchell (cf. *infra* pp. 283–293) will deal with the difficulty of explaining why a marked interest in monstrous appearances should occur in certain periods. Among the many hypotheses proposed, the idea of (1) emphasising one's wealth and ease by distancing oneself from the poor and the destitute, and (2) a possible connection with the concept of the Evil Eye, stand out as the most probable explanations for a phenomenon in which many different causes are nevertheless intertwined.

To our knowledge, there is just one single passage in which Pliny suggests that the idea of 'monster' has developed over time. By the first century CE, what had once been a monster or prodigy was a matter not only of interest but also for celebration.

> Gignuntur et utriusque sexus quos hermaphroditos vocamus, olim androgynos vocatos et in prodigiis habitos, nunc vero in deliciis.
>
> Persons are also born of both sexes combined, whom we call hermophrodites. Once they were called androgyns and seen as prodigies, but today we see them as entertainers. (Pliny the Elder, *Naturalis Historia* 7, 34)

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28 For these and many other (!) examples, see the books mentioned in footnote 1, and Chappuis Sandoz (2008) 34–35, who rightly states that 'l' imagination a ainsi plus de force que l' observation et que les faits.' Surprisingly the Flemish traveller William of Rubruck (1220–1293), who went to Mongolia, doesn't mention the existence of the many strange creatures his fellow traveller Marco Polo speaks about.

29 It is the great merit of Chappuiz Sandos (2008) 27–29 to have emphasised this crucial difference between individual monstrous oddities and monstrous races. On heredity, see Aristotle, *Historia animalium* 585b–586a (blind people produce blind offspring, physically impaired children are born of physically impaired parents); Pliny the Elder, *Naturalis Historia* 7, 50. However, in these same passages both Aristotle and Pliny explicitly acknowledge the possibility that healthy parents might have impaired offspring or vice-versa.

Obviously this interest in marvels did not just begin in Pliny's time. Pompey the Great had already positioned images of celebrated marvels among the decorations of his theatre.[30] A whole tradition links Roman emperors with the interest in anomalous bodies, a custom possibly inherited by the Ptolemean court in Alexandria.[31] Not only did emperors collect bizarre and curious objects, they also surrounded themselves with all kinds of deformed bodies. This tradition runs from the Emperor Augustus to third century monarchs such as Heliogabalus, who reigned from 218 to 222, and sometimes even beyond. Bleda, brother of Atilla the Hun, is said to have had a dwarf named Zerkon, who entertained the master and his friends with a faked speech impairment.[32] The bones of Pusio and Secundilla, the tallest people alive during the reign of Augustus, were preserved in the *Horti Sallustiani*. Augustus himself once exhibited a dwarf named Lycius, who was less than two feet tall and weighed only seventeen pounds. We have already mentioned the interest of members of Augustus' household in dwarfs (cf. *supra* p. 219). Tiberius had a dwarf; Nero had an ugly and deformed slave as a companion named Vatinius, who belonged among his *foedissima ostenta*; Domitian possessed a *puerulus*; at Hadrian's court the hermaphrodite Favorinus worked as a philosopher; Commodus possessed hermaphrodites and was fond of a slave with an enormous penis; and Heliogabalus collected so many deformed persons, including dwarfs, foolish slaves and eunuchs, that his successor Alexander Severus disposed of the entire troop. Many of these emperors also kept eunuchs at their court.[33] The connection between emperors and the deformed can be explained by the fact that both were considered social anomalies. They were two polarities in the social spectrum: the debased and the exalted.[34] In addition, 'good' emperors were depicted as

[30] Pliny the Elder, *Naturalis Historia* 7, 34. These included Eutychis of Tralles, who had given birth thirty times, and Alcipe who gave birth to an elephant—the latter case is ranked *inter portenta*.

[31] All the evidence is conveniently assembled and discussed by Trentin (2011). According to Garrido-Hory (1981) 114, the interest in bizarre bodies would have been typical for the first century CE. The taste for the monstrous is also typical of Roman transgressive humour. See Clarke (2007).

[32] Priscus Panita, fragmentum 8 (ed. Carolla).

[33] Pliny the Elder, *Naturalis Historia* 7, 75 (Pusio and Secundilla); Suetonius, *Augustus* 43 (Lycius); Suetonius, *Tiberius* 61; Tacit, *Annales* 15, 34, 2; Suetonius, *Domitianus* 4; SHA, *Hadrianus* 10 (on Favorinus see also Swain (1989), in this volume Lutz Grauman tends to exclude Favorinus as an hermaphrodite, cf. *infra* pp. 183–184); SHA, *Commodus* 10, 8–9; SHA, *Heliogabalus* 29, 3 and *Alexander Severus* 34, 2–4. On eunuchs at court, see Scholtz (2001) 119; Tougher (2008) 9.

[34] Trentin (2011) 207.

being sober about deformity,[35] while the emperors who were considered monsters themselves were excessively fond of the presence of anomalous bodies.[36]

Wealthy Romans seem to have followed the examples of their emperors and started their own collection of *monstra*. Foolish slaves, dwarfs and eunuchs were especially popular.[37] According to Plutarch and pseudo-Longinus, there was a market where one could buy them. Quintilian claims that people paid higher prices for deformed slaves than for physically perfect ones: apparently, the former were in higher demand.[38] Moralists sometimes express their scorn for the fashion of keeping deformed people as pets: Seneca complains about the enormous expenses caused by the dwarf Harpaste, his wife's pet. Moreover, she acted like a tyrant: when she went blind, she did not want to admit the fact, but kept on asking for another room, claiming that hers did not have enough light.[39] Criticism and satire invoke suspicions about the sexual abuse of deformed servants.[40]

Clearly, the many anecdotes about Roman emperors and their monsters, especially those mentioned in the *Historia Augusta*, are not necessarily 'historically accurate.' Quite often, they serve as political metaphors, which help to provide a picture of the 'bad emperor'. Nevertheless, the evidence cited supports the view that Pliny, in his digressions on monstrous races and the oddities of the human species, was following a fashion of his time.

5. Monstrous Races and Disabilities

Given the difficulties involved in 'retrospective diagnosis' (cf. Lutz Graumann in this volume), can we link certain features of monstrous races to impairments as they are perceived today? A recent contribution to the scholarly

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[35] Hence, the very same Emperor Augustus is said to have shunned dwarfs, the deformed, and anyone of that kind, considering them evil-omened mockeries of nature. See Suetonius, *Augustus* 83 and Trentin (2011) 197.

[36] Trentin (2011) 199–207 elaborates on the example of the Emperor Commodus, who at a private banquet served two hunchbacks on a silver platter, smeared with mustard. See Scriptores Historiae Augustae, *Commodus* 11, 1.

[37] Gevaert (2002), Tougher (2008) 27–28.

[38] Plutarch, *De curiositate* 520c; Pseudo-Longinus, *De sublimitate* 44, 5. Acording to Allély (2004) 97 this was more or less a freak show, rather than a real market. Quintilian, *Institutio oratoria* 2, 5, 11. Seneca, *Epistulae morales* 50, 2 and Pliny the Younger, *Epistulae* 9, 17, 1 scorn their fellow aristocrats who need to keep these 'hideous' creatures.

[39] Seneca, *Epistulae morales* 50, 2.

[40] Pliny the Elder, *Naturalis Historia* 34, 11–12 (sex with a hunchback slave) and Martial, *Epigrammata* 6, 39 a scorching satire on the fascination of Roman women for sexual intercourse with disabled people. On this and other epigrams, see Gevaert (2002).

debate has demonstrated that this is not beyond the realms of possibility.[41] The condition of the headless *blemmyae*, said to come from Ethiopia and to have their mouth and eyes in their chest, might refer to the foetal malformation known as anencephaly.[42] The one-eyed condition of the *cyclops* might be explained ophthalmologically.[43] The *hippopodes* from Scythia, who had feet like horses; the *himantopodes* with feet like leather throngs, who crawled instead of walked; the *monocoli* or *sciapodes*, who have only one leg: all these could be related to some congenital malformation of the limbs.[44] The dog-headed *cynocephali* might refer to people who were excessively hirsute.[45] And stories about the famous tribe of the *pygmies* may have originated from the observation of people with dwarfism.[46] Of course, other explanations might be adduced to explain the ancient belief in the existence of these tribes (the *blemmyae* may have had facial features tattooed on their chests; the *sciapodes* may have been Hindu yogis[47]). The fact remains that link between existing impairments and the belief in monstrous races was at least possible.

6. Perception of the Other and Self-Perception by the Other

It was not easy for a Roman emperor to satisfy the needs and desires of the Roman people: to become popular, he had to give them more spectacular events than his predecessor or at least maintain them at the same level. Bearing in mind his citizens' fascination for the bizarre and thus for *monstra*, Emperor Domitian, who reigned from 81 to 96, brought Rome

41 Chappuis Sandoz (2008) 30–31.

42 Pliny the Elder, *Naturalis Historia* 5, 46. See Dasen, Leroi (2005); Charlier (2008) 137–144; Dasen (2009). Herodotus, *Historiae* 4, 191 places the Blemmyes in Libya.

43 Charlier (2008) 145–160. SHA, Divus Aurelianus 33 mentions Blemmyes but without any reference to an abnormal bodily shape!

44 Pliny the Elder, *Naturalis Historia* 5, 46 and 7, 23. Garland (2010) 111 offers an example of a so-called lobster-scissors malformation among people from an African tribe. The Monocoli and Sciapodes are often confused: while the former are said to have had just one foot, the latter are described as having two very large feet. See Nichols (2011) 155–156 for ancient and later testimonies.

45 Pliny the Elder, *Naturalis Historia* 7, 23. See Nichols (2011) 123–125 for a detailed account of ancient and later testimonies.

46 Charlier (2008) 225–244; Nichols (2011) 109–112 for many testimonies on Pygmies. On Roman concepts and depictions of dwarfs, see Dasen (1988); (2006) and (2008); Wyns (2011).

47 Chappuis Sandoz (2008) 30 for such explanations.

some remarkable spectacles. According to Cassius Dio, he organised gladiatorial games at night, and from time to time had dwarfs (νάνοι) and women act as pugilists.[48] A whole collection of figurines depicting boxing dwarfs confirms that they did indeed figure as fighters in the arena.[49] But what is particularly striking for our purposes is another event, depicted in great detail by the poet Statius.[50] Domitian made a group of dwarfs play the role of Pygmies in the Amphitheatrum Flavium. In the first phase the dwarfs fought against each other, in the second they fought against cranes, the natural enemies of Pygmies. In doing so, they were imitating the famous battle with the cranes depicted in Greek literature from Homer onwards.[51]

> Then comes a bold array of dwarfs,
> whose term of growth abruptly ended has
> bound them once for all into a knotted lump.
> They give and suffer wounds,
> and threaten death—with fists how tiny!
> Father Mars and Bloodstained Valor laugh
> and cranes, waiting to swoop on scattered booty,
> marvel at the fiercer pugilists.[52]
>
> Statius, *Silvae* 1, 6, 57–64 (trans. J.H. Mozey)

Here, individuals exhibiting the bodily peculiarity of small stature become a monstrous race, the tribe of the Pygmies.[53] A confusion between the two categories often arises in Graeco-Roman literature, whereby the term 'pygmy' is used to denote a dwarf.[54] The event described by Statius paves the way

48 Dio Cassius 67, 8, 4.

49 Boxing was regularly done in the arena. It therefore seems less probable that the dwarfs would act as gladiators or that they would fight female gladiators, who did indeed exist. For a good summary of the discussion, in favour of the theory on boxing dwarfs, see Brunet (2003) and Wyns (2011) 54–55. Both studies suggest that Domitian would have introduced the boxing dwarfs in the arena as a novelty. See Waser (2010) for a huge collection of bronze boxing dwarfs.

50 Weiler (1995).

51 Homer, *Ilias* 3, 3–7. See Nichols (2011) 109 for other references. See also Dasen (1988) 269–270 and Dasen (1993) 187 on the comical aspect of the battle between the Pygmies and the cranes.

52 *Hic audax subit ordo pumilorum,/ quos natura brevis statim peracta/ nodosum semel in globum ligavit./ Edunt vulnera conseruntque dextras / et mortem sibi* (*qua manu!*) *minantur./ Ridet Mars pater et cruenta Virtus,/ casuraeque vagis grues rapinis/ mirantur pugiles ferociores*.

53 Dwarfs were considered as monsters in ancient Egypt, see Fisher (1987). *P. Oxy*. 3, 465 ranks dwarfs alongside τέρατα and other disabilities.

54 Herodotus, *Historiae* 3, 37 and Pseudo-Aristotle, *Problemata* 10, 11, 892a12 use the term Pygmy to denote a dwarf. In *Problemata* 892a, Aristotle (or a contemporary) draws a distinction

for an exercise in historical imagination and empathy. One can imagine imperial functionaries getting slave merchants, trainers, entertainers and others to supply a group of between fifty and hundred dwarfs in good shape to perform in the amphitheatre.[55] Would the performance in the arena, watched by tens of thousands, have reinforced the performers' feelings of being among their own kind, thus facilitating a sort of group identity? Would the spectators have viewed them as a separate species of humankind? Not only did Domitian show his audience that absolutely anything was possible for a Roman emperor, even bringing a large group of dwarfs together in the same fight: the game could also be seen as a moral lesson for the many *deformes* in the audience. If someone with an anomalous body can fight, be victorious and please the gods, what are those other *deformes* waiting for?

Here we touch on a sphere of ancient life hardly ever mentioned in the sources: group identity and the possible self-esteem of segregated groups. Separated communities undoubtedly existed. One thinks of aged, destitute and sick slaves who were simply left near the temple of Asclepius on Tiber Island, in the City of Rome.[56] Sometimes we come across testimonies of the blind, the mobility-impaired or the deaf-mute living together in an environment of their own.[57] Might the learned observations of geographers and natural scientists about monstrous races have been responsible for the fact that at least some people in ancient society regarded dwarfs, albinos, hermaphrodites, the hereditarily deaf, blind or one-eyed, as separate species of humankind? And would this have lead to the feeling that "we are special" among some of those with hereditary disabilities, in either a positive or a negative sense? (The absence of any empathy by owners or moralists for the feelings of the *monstra* involved is notable.) Or is this merely wishful thinking? When Alexander Severus got rid of Heliogabalus's troop of *monstra*, among whom there were male and female dwarfs as well as fools (*nanos et nanas et moriones*), he decided to donate some of them to the people

between congential nanism and people who remain small because they are malnourished. Conversely, Strabo, *Geographica* 17, 2, 1 states that the tribe of Pygmies was probably 'invented' through the observation of individual dwarfs, since nobody had ever seen a real Pygmy.

55 The numbers necessary for giving the impression that the Colosseum arena was not empty are estimated by Brunet (2004) 25.

56 We know little or nothing about how they lived. See Schmitt-Roedel (1974). See Laes (2009) for some suggestions regarding the living conditions of this segregated community.

57 Gregory of Tours, *Vita Andreae* 32 (a family of blind persons); Augustine, *De quantitate animae* 18, 31 (a large family of deaf-mutes). See Laes (2008) 104–109. See also the passages by Aristotle and Pliny on heredity, cited in note 29.

as entertainers. Maintenance of the rest, of those who could not serve this purpose, was assigned to various cities, so that they would not be encumbered with hordes of beggars. One can imagine the threat that these people posed: imbued with the sense of having been selected by Heliogabalus for 'being special', their expulsion from court might have led them to form gangs that would disrupt social life.[58] As stated in the introduction, the criteria within which disability is narrated do not limit further our meagre sources, but open up new and wider possibilities of interpretation. We hope to have revealed at least one such possibility in this chapter.

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58 SHA, *Alexander Severus* 34, 2.

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A KING WALKING WITH PAIN? ON THE TEXTUAL AND ICONOGRAPHICAL IMAGES OF PHILIP II AND OTHER WOUNDED KINGS*

Évelyne Samama

1. Introduction

During the Roman Empire, no one doubted that scars or even disabilities due to war wounds were the sign of a soldier's or a king's military value. As Plutarch put it, "You can tell a man fit for war (*polemikos*) by his body being covered in wounds".[1]

No one dared to suggest that wounds might induce a possible weakness of the commander's body, due to the various assaults on his physical integrity and their possible influence on his military or political decision-making. There are no texts that indicate any relationship between a disabled commander and a defeat. But the Greek world had for centuries maintained the tradition of the 'perfect body' and what it considered the 'heroic' state of mind. In the Homeric conception, which lasted a long time, a good warrior stays free of injury or dies on the battlefield; and in any case, this happens with the agreement of the gods. But time, and various wars, passed. The fourth century BC is, from this perspective, the turning point in how physical marks were regarded. The frequency of wars at this time meant that a considerable number of men had been wounded and suffered from mobility problems or other disabilities. Scars from arrow wounds or other injuries were plentiful and visible. It is also well known that during the last three centuries before Christ, the people of the Hellenistic states not only lost their reluctance to represent old, sick or mutilated bodies, but even considered the portrayal of distorted bodies an aesthetic challenge, as we can see from statues large and small, paintings, or art works in general. This development also helped to change people's views of veterans and wounded soldiers.

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* I thank my colleague, Dr. S. Baddeley, as well as Christopher Goodey, for their help turning this text into a more fluent English paper.

[1] Plutarch, *De fortuna Alexandri* 339c: ἀνὴρ πολεμικὸς καὶ τραυμάτων τὸ σῶμα μεστὸς ὀφθείς.

My aim, therefore, in discussing disability and disparate bodies, is to examine the moment of change between the two opposing visions of the mutilated body in the Graeco-Roman world. The Macedonian king Philip II is a perfect example, both chronologically and in literary terms, of the evolution from the Archaic and Classical mind-set to the Hellenistic one. Before re-examining Philip's injuries, however, and considering how far this model influenced other portrayals of kings in which physical marks did not diminish the leader's courage but became indicators of it, I must very briefly hark back to the heroic model of the *Iliad*.

2. Menelaus, King of Sparta

It is well known that there are no lame heroes in the poem. The warriors either die immediately or return to combat within a few hours or days, after a period of rest. Hermann Frölich, who carefully counted all the injuries (147) and published his findings in 1879, which are still referred to by nearly all scholars on that topic,[2] stated unsurprisingly that most of the wounds to the head or upper body, and especially to the heart, the liver or the belly, were deadly. Warriors often survived wounds to the hands, arms and legs. But we must not forget that wounding in the *Iliad* has above all a literary purpose: despite the truly astonishing details that led Frölich to consider Homer to be simply a military surgeon, their aim is to keep the audience in suspense, to make some striking comparison, or to vary the rhythm of the poem.[3]

2.1. *The Symbolism of Wounds*

As a single example of the importance of symbols, note the graze to Menelaus' belly, from an arrow that had been deflected by his belt (*Iliad* 4, 139–149). Many of the details emphasise the symbolic importance of this wound; however I will restrict myself to four points.

First, Menelaus is the first Greek hero to be hit by the Trojans, probably because he is at the origin of the war. Secondly, the wound was inflicted by an arrow, and in the hierarchy of arms the bow is considered the weapon of cowards and the weak, who shoot from far away. So the wounding itself is far from noble, as would have been fitting for a king—one who was moreover brother of the commander-in-chief. Thirdly, the arrow is said (by

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[2] Frölich (1879); Samama (forthcoming).
[3] Friedrich (1956).

Agamemnon) to have been shot merely by 'someone' (τις), so that Menelaus is even deprived of a named enemy. The audience, however, has learnt just previously that the anonymous hero is the Trojan Pandaros, son of Lycaon, who, with Apollo's help, shot the mortal arrow that was deflected just in time by Athena. Lastly, the simple graze bleeds abundantly, impressing both the victim and Agamemnon, who nearly faints. This leads to the urgent intervention of Machaon, son of the hero-surgeon Asclepius.[4] The wound turns out to be harmless. The emphasis here, however, is on the precise part of Menelaus' body aimed at: the arrow just misses his lower belly, where his virility might have been affected. Pandaros is acting as the substitute for Paris-Alexandros, striking a physical blow at Menelaus' sexual power.

What must be kept in mind is that in the *Iliad*, being wounded is a form of punishment and has a strong symbolic value. Most of the warriors therefore try as much as they can to hide their injuries, both out of shame and to avoid giving the enemy any reason to celebrate. This way of looking at the wounded or diminished body retains a firm place in the classical tradition; we know of similar anecdotes from Sparta.

2.2. *Early Developments in the Classical Period*

By the end of the fifth century and following the numerous conflicts of the Peloponnesian war, direct battle wounds and consequences of the war such as famines or epidemics, which tremednously increased the number of casualties, had affected so many cities and families that mentalities had changed. From the last third of the fifth century onwards, staying alive becomes progressively more valuable than the *kleos aphthiton* or 'imperishable glory' of death in action. The years of incessant war doubtless set a higher price on life. This became even truer for generals than for ordinary citizen-soldiers. A remark attributed to Timotheos, the Athenian general, shows that up to a certain point, the wise general (or king) was not supposed to risk his life more than necessary:

> This is why Timotheus was right saying to Chares, who showed the Athenians the scars on his body and his shield penetrated by a spear. 'As for myself, I felt very ashamed when during the siege of Samos a spear landed next to me, because in exposing myself as I did, I behaved more like a youngster than as a general and commander of such a great army'.[5]

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[4] *Iliad* 4, 190–219. Machaon himself is wounded later in *Iliad* 11, so Menelaus turns out to have been his only patient.

[5] Plutarch, *Vita Pelopidae* 2, 6: Διὸ καλῶς ὁ Τιμόθεος, ἐπιδεικνυμένου ποτέ τοῖς᾽Αθηναίοις τοῦ Χάρητος ὠτειλάς τινας ἐν τῷ σώματι καὶ τὴν ἀσπίδα λόγχῃ διακεκομμένην· ᾽Εγὼ δ᾽ εἶπεν, ὡς λίαν

We can already see here emerging, during the fourth century, a notable difference: the indicative role of the commander, whose disappearance from battle due to injury or death leads to inevitable defeat.[6] The increasing personalisation of leadership[7] gives the general a vital prominence. The fundamental need for a good general to have *mens sana in corpore sano*[8] appears even more striking in kingdoms such as Macedonia.

3. Philip II, King of the Macedonians

Philip, born in 382, was the third son of Amyntas III and one of his wives, Eurydike. On the death of his father in 370, his two elder brothers succeeded Amyntas to the throne, but both died within a few years. When the second son, Perdiccas, perished with 4,000 of his men in the summer of 360 during the war against the Illyrian king, Bardyllis, his son Amyntas was too young to reign. Although Philip, the boy's uncle, was chosen as *epitropos* or "regent", he managed to get himself acclaimed by the army as "king of the Macedonians". He quickly became famous for consolidating his authority over the Macedonian State and within two decades had transformed the Argead territory into a powerful kingdom, discouraging any attacks on its borders.

In his political behaviour he demonstrated an exceptional will, together with an unusual physical strength that encouraged his fellow men, frightened the Athenians and has fascinated some recent biographers—a fascination only surpassed by that for his son Alexander.[9] The main interest is in politics and the relationship between the kingdom of Macedonia and the Greek cities. After Arnaldo Momigliano's biography,[10] first published in 1934, other scholars followed.[11] Most of them, for instance Ian Worthington, see Philip "as a great man", according to Diodorus Siculus' formula, "the greatest of

ᾐσχύνθην ὅτε μου πολιορκοῦντος Σάμον ἐγγὺς ἔπεσε βέλος, ὡς μειρακιωδέστερον ἐμαυτῷ χρώμενος ἢ κατὰ στρατηγὸν καὶ ἡγεμόνα δυνάμεως τοσαύτης. The siege of Samos lasted for ten months and Timotheus took the city in 365 BC, cf. Plutarch, *Apophthegmata regum et imperatorum* 187c2.

6 Thus, e.g., the battle of Mantinea in 362, when the Thebans, although victorious in the field, stopped the battle after Epaminondas' death and did not claim victory (Xenophon, *Hellenica* 7, 5, 25–27).

7 Lengauer (1979); Tritle (1992), 71–89; Hamel (1998).

8 Juvenal, *Saturae* 10, 356.

9 Thomas (2007) 61–83.

10 Momigliano (1934).

11 Ellis (1976); Cawkwell (1978); Worthington (2003) 69–98.

the Kings in Europe".[12] That word 'king' relates to his duties both as army commander and as statesman.

All these accounts mention Philip's strategic and political efficiency, underlining the fact that Alexander's conquest was made possible by his father's achievements in Greece. But although most of Philip's life is chronologically documented, far less interest has been displayed in his physical aptitudes. He surely would have had to excel in combat and horsemanship. When, in 336, the king of the Macedonians was killed by one of his bodyguards at the age of 46, he still was a strong warrior and could have expected to live at least another twenty years. Let us now turn to Philip's body.[13]

3.1. *Injuries in General*

From the few indications given by his contemporaries,[14] especially the Athenians of course, it appears that the king had been injured several times. In his second *Letter* to Philip, written during the summer of 344, Isocrates prompts the king to be more cautious.[15] The Alexandrian scholar Didymus Chalcenterus (first century BCE), commenting this speech, explains the circumstances: Philip had been wounded, along with 150 of his *hetairoi*, during the military campaign against the Illyrian king[16] in spring 344. News of the injury caused a stir in the Greek cities, particularly in Athens, where his opponents were hoping the king would die.[17] In pseudo-Demosthenes' Oratio 11, 22 (*Answer to a Letter sent by Philip to the Athenians*)[18] we learn only that he had again received several injuries, to the extent that the whole of his body had been wounded.[19] This text supposedly dates from 339.

12 Diodorus Siculus, *Bibliotheca* 16, 95.

13 Complementing the interesting article by Swift Riginos (1994), who provides ample bibliography on the subject.

14 Chronologically, the *testimonia* are following: Isocrates, *Epistula* 2, Demosthenes, *De corona* 67, with the commentaries (*Scholia in Demosthenis De corona* 67 ed. Dilts) and Didymus (col. 12, 1, 63).

15 Isocrates, *Epistula* 2, 3, 7 and 10.

16 His name is Pleuratos (Didymus) or Pleurias (Diodorus Siculus, *Bibliotheca* 16, 93, 6).

17 The same hope was raised in 351 (Demosthenes, *Philippica* 1, 10–11) and again in 342 (Demosthenes, *De Chersoneso* 35–36).

18 Both the letter and the answer were probably written by Anaximenes during the last years of the fourth century (cf. M. Croiset, Démosthène *Harangues*, vol. 2, Paris: Les belles Lettres (CUF), 1946, 142–146).

19 Κατατετρῶσθαι πᾶν τὸ σῶμα. So Seneca Rhetor, *Controversiae* 10, 5, 6: *crure debili, oculo effoso, iugulo fracto*.

The list of Philip's injuries comes in Demosthenes' speech of 330, *On the Crown*:

> Philip himself, against whom we were fighting, had, for the sake of empire and supremacy, endured the loss of his eye, the fracture of his collar-bone, the mutilation of his hand and his leg, and was ready to sacrifice to the fortune of war any and every part of his body, if only he could live with the remnant: a life of honour and fame.[20]

From this cataloguing of his various wounds, the audience might have imagined that they had been incurred during the same day or the same campaign. The aim is evidently political: we would not expect a medical report.

It seems that only the eye and thigh wounds had any impact on Philip's appearance, as the first left him with a scar through the right part of his face where his eyeball had been removed, and he limped from the other one. Neither his wound in the right collar bone sustained in Illyria in 344, nor the one he received in the hand in 339, during the fight against the Triballoi, an independent Thracian tribe, seem to have left any visible after-effects. Let us look now at the testimonies on these two major wounds—albeit briefly, since they have already been thoroughly studied by Alice Swift Rigonos and are not our major concern here.

3.2. *Eye Injury*

The king of Macedonia lost his eye during the siege of the small Greek city of Methône[21] on the gulf of Therma, during the spring of 354. Authors' accounts of the projectile vary, but they agree that Philip lost his right eye.[22] Didymus' commentary on Demosthenes, recording earlier sources such as

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[20] [...] ἑώρων δ᾽ αὐτὸν τὸν Φίλιππον, πρὸς ὃν ἦν ὑμῖν ὁ ἀγών, ὑπὲρ ἀρχῆς καὶ δυναστείας τὸν ὀφθαλμὸν ἐκκεκομμένον, τὴν κλεῖν κατεαγότα, τὴν χεῖρα, τὸ σκέλος πεπηρωμένον, πᾶν ὅ τι βουληθείη μέρος ἡ τύχη τοῦ σώματος παρελέσθαι, τοῦτο προιέμενον, ὥστε τῷ λοιπῷ μετὰ τιμῆς καὶ δόξης ζῆν. Gellius, *Noctes Atticae*, 2, 27 comments on Demosthenes' portrait of Philip in parallel with Sallust's portrayal of Sertorius (*Historiae* 1, 88).

[21] Strabo, *Geographica* 8, 6, 15, speaking of the small town of Methane between Epidaurus and Troezenae, mentions that the name was sometimes also written Methône, like the "name of the Macedonian city where Philip lost an eye because of an arrow (ἐν ᾗ Φίλιππος ἐξεκόπη τὸν ὀφθαλμὸν πολιορκῶν)". But in 7a, 1, 22 [fr. 25], he writes that while Philip, son of Amyntas, was besieging the city of Methône, his right eye was blinded by a catapult: ἐν δὲ τῷ πρὸ τῆς Μεθώνης πεδίῳ γενέσθαι συνέβη Φιλίππῳ τῷ ᾽Αμύντου τὴν ἐκκοπὴν τοῦ δεξίου ὀφθαλμοῦ καταπελτικῷ βέλει κατὰ τὴν πολιορκίαν τῆς πόλεως. About Methône, cf. Hatzopoulos-Knoepfler (1990) 661–665. Lucian, *Quomodo historia conscribenda sit* 38 is the only author to say that it happened in Olynthos.

[22] Esser (1931).

Theopompus, Marsyas and Douris, adds some details.[23] Citing Theopompus, he explains, for instance, that Philip was shot from the city wall during his inspection tour and not in a fight. Later authors who mention the episode generally agree with this version, which had probably been officially validated by the Macedonian court circles. The eye injury is also briefly reported by Diodorus Siculus,[24] no doubt after Ephorus, as well as twice by Strabo[25] and a bit later by Justin.[26] During the fourth century CE, the Antiochean orator Libanius repeated Demosthenes' words.[27] Most of the reports use nouns or verbal forms of κόπτω, 'to smite, cut off, strike,'[28] illustrating the violence of the event.[29]

Over the years, the story was somehow amplified. Pliny the Elder adds a doctor's name, Critoboulos.[30] Others, such as Lucian of Samosate,[31] give the name of the archer, Aster, or even report how he threatened the king before striking him with an arrow.[32] This is surely fiction. Some sources report that the king's behaviour did not change[33] after the accident; others[34] state that

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23 For the following lines, see Swift-Riginos (1994). Didymus col. 12, 43 (in *FGrHist* 2b, 115 F frag. 52 ad Theopompus of Chios): περὶ μὲν γὰρ τὴν Μεθώνης πολιορκίαν τὸν δεξιὸν ὀφθαλμὸν ἐξεκόπη τοξεύματι πληγείς, ἐν ᾧ τὰ μηχανώματα καὶ τὰς χωστρίδας λεγομένας ἐφεώρα, καθάπερ ἐν τῇ δ̅ τῶν περὶ αὐτὸν ἱστοριῶν ἀφηγεῖται Θεόπομπος· οἷς καὶ Μαρσύας ὁ Μακεδὼν ὁμολογεῖ.

24 Diodorus Siculus, *Bibliotheca* 16, 34, 5: Ἐν δὲ τῇ πολιορκίᾳ ταύτῃ συνέβη τὸν Φίλιππον εἰς τὸν ὀφθαλμὸν πληγέντα τοξεύματι διαφθαρῆναι τὴν ὅρασιν. ("During the siege, it happened that Philippos, hit in the eye by some arrow, lost his sight".)

25 Strabo, *Geographica* 8, 6, 15 and 7a 1, 22 [fr. 25] (cf. *supra* note 21).

26 Justin, *Historiarum epitome* 7, 6: *in praetereuntem, de muris sagitta iacta, dextrum oculum regis effodit.*

27 Libanius, *Progymnasmata* 12: τὸν ὀφθαλμὸν ἐκκεκομμένος. End of the second century CE, Clemens of Alexandria had also repeated the list in *Protrepticus* 4, 54, 5.

28 ἐξεκόπη (Strabo and Didymus), τὴν ἐκκοπὴν (Strabo), ἐκκεκομμένος (Demosthenes and Libanius).

29 The Hippocratic treaty, *Epidemiae* 5, 49 reports a similar accident, but the patient's eye was not lost: Ὁ δὲ ἐς τὸν ὀφθαλμὸν πληγεὶς ἐπλήγη μὲν κατὰ τοῦ βλεφάρου, ἔδυ δ᾽ ἡ ἀκὶς ἱκανῶς· ὁ δὲ ἀθὴρ προσυπερεῖχε. Τμηθέντος τοῦ βλεφάρου, ἤρθη πάντα· οὐδὲν φλαῦρον· ὁ γὰρ ὀφθαλμὸς διέμεινε· καὶ ὑγιὴς ἐγένετο ξυντόμως· αἷμα δ' ἐρρύη λάβρον, ἱκανὸν τῷ πλήθει.

30 Pliny, *Naturalis historia* 7, 124: *Magna et Critobulo fama est extracta Philippi regis oculo sagitta et citra deformitatem oris curata orbitate luminis*: 'Great is also Critoboulos' fame, for he had extracted an arrow from the eye of Philip, the king, and healed the eyeball without deforming his face.'

31 Lucian, *Quomodo historia conscribenda sit* 38.

32 Plutarch, *Parallela graeco-romana* 307d, probably after Duris of Samos, in *FGrHist* 76 F 36. The projectile is generally said to be an arrow, Strabo alone mentions a missile launched by catapult.

33 "Philip accepted his injury without any negative effects on his bravery and ability in war; nor was he vengeful, showing clemency to the besieged when they surrendered", Lascaratos (2004).

34 Pseudo-Demetrius, *De elocutione* 293.

Philip lost his temper every time somebody mentioned the words 'eye' or 'Kuklôps' in his presence, since it had most probably become a nickname for the king. Whatever the case, Philip survived, thanks to his physician[35] or rather to his solid constitution.[36]

Fortunately, archeologists have provided us with some artefacts.[37] The well-known archeological discoveries by Manolis Andronikos and his colleagues in various tombs at Vergina (Aigai) in 1977 gave us, among other beautiful objects, a small ivory head[38] and some remains of a skeleton. Although the body had been cremated, forensic surgeons about twenty years ago were able to analyse the skull.[39] There was some debate about its identification, but this is not the point here.[40] A reconstruction of Philip's head has been attempted, showing a scar across the right eyebrow and a missing eyeball.[41]

3.3. *Thigh Injury*

Thirteen years after the loss of his right eye, in 341, Philip was again wounded seriously, during an engagement on the Thracian border.[42] He was hit by a spear that went through his thigh,[43] but neither Demosthenes,[44] Justin[45] nor Plutarch[46] say which. The wound was bad, and his troops thought the

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35 Critoboulos (rather than Critodemos) had a high social position, as we can suppose, from the trierarchy he was in charge of in 326. Concerning the two different names for the doctor (Critoboulos, Critodemos), Heckel (1981) states that Arrian (*Anabasis Alexandri* 6, 11, 1) is wrong, and that the name is Critoboulos (the same physician who healed Philip) also cured Alexander and became a trierarch in Nearch's fleet.

36 His illness a few months later, which was so severe that he was reported dead (Demosthenes, *Olynthiaca* 3, 5), is a possible consequence of his wound: see Esser (1931), 252.

37 Grmek, Gourevitch (1998) 42–45.

38 Philip's wound is also depicted in other representations. The Head of Copenhagen, a realistic marble copy of a prototype from the fourth century AD, made in the age of Trajan, also clearly shows a distinct nick in the upper corner of the right eyebrow and the characteristic raising of its corners. A coin (ca. 354–350 BCE) found in the Greek town of Capsa, depicting Philip in right profile, presents a scar like a crescent moon between the lower and upper eyelids, near the external canthus, supposed to be the engraver's deliberate indication of the injury (cf. Lascaratos 2004).

39 Musgrave, Neave, Prag (1984); Prag (1990); Swift Riginos (1994); Bartsiokas (2000).

40 Swift-Riginos (1994) provides a complete presentation of the debates, notes 1, 2 and 3, 103–104.

41 Prag (1990).

42 The battle followed a quarrell with the Triballoi.

43 Plutarch, *De fortuna Alexandri* 331c: Φίλιππου λόγχῃ τὸν μηρὸν ἐν Τριβαλλοῖς διαπαρέντος.

44 Demosthenes, *De corona* 67. Only Didymus (loc. cit.) reports the right leg to be hurt.

45 Justin, *Historiarum epitome* 9, 3, 2: [...] *et mox proelium in quo ita in femore uulneratus est Philippus, ut per corpus eius equus interficeretur.*

46 Plutarch, *De fortuna Alexandri* 331c.

king had died.[47] Philip was lucky again: his wound healed, but left him lame. As commander of the cavalry he was vulnerable to such injuries, since his legs were exposed to the spears and swords of infantrymen. The wound probably gave Philip a shortened thigh muscle or a contraction of the sciatic nerve. The medical texts from the *Corpus Hippocraticum*, for instance the *Prorrheticum II*, written by a Coan doctor during the second half of the fifth century BCE, warn the physician—and the patient—that 'major wounds which have completely severed the nerves (tendons) [...] evidently leave the patient lame'.[48]

Doubtless Philip was still able to ride, and he was certainly more at ease on his horse than walking with pain. His limping leg did not affect his ability to command, and it is interesting to note that no historian writing about the various battles he fought ever mentioned a physical weakness. Nor did anyone suspect Philip of having changed his tactical habits because of his disability. So clearly Philip kept his complete authority not only over the troops but also over the *hetairoi* and other influential members of the court circle. This brings us therefore to the question: is a disabled king still a good king? Can he be accepted as a comptetent leader, and what is his own attitude and that of others towards his shattered body?

4. Is a Disabled King Still a Good King?

4.1. *The Classical View*

To understand more clearly the difference in the view of physical disabilities between the beginning and the end of the fourth century BCE, we can contrast Philip with another lame king, whose reign began about forty years earlier, in 398: Agesilaus II, king of Sparta. Shortly after his death, Xenophon, a friend and admirer, wrote an *encomium* praising the Spartan king's virtues. Nowhere in this text does he mention that Agesilaus had poor health and was disabled (χωλός).[49] The one mention of some glorious war wounds is immediately followed by one about his piety; referring to the Spartan victory against a Greek coalition at the battle of Coroneai[50] in 394, he writes: 'Though

47 So Justin, *Historiarum epitome* 9, 3, 3: *Cum omnes occisum putarent* [...].

48 Hippocrates, *Prorrheticum* 2, 15 (9, 40–43 Littré): Τὰ δὲ τρώματα τὰ ἐν τοῖσι ἄρθροισι μεγάλα μὲν ἐόντα καὶ τελέως ἀποκόπτοντα τὰ νεῦρα τὰ συνέχοντα, εὔδηλον ὅτι χωλοὺς ἀποδείξεις.

49 Thus Plutarch, *Vita Agesilae* 3, 4.

50 The episode is also described in Xenophon, *Hellenica* 4, 3, 15–23.

wounded in every part of his body with every sort of weapon, he did not forget his duties towards the god.'[51] Knowing Xenophon as a very religious man,[52] we may interpret the sentence in two complementary ways. Since any man suffering from a number of wounds might think first only of his pain, Xenophon underlines the political and religious conscience of the king who, in spite of it, immediately thanked the divinities for the victory. But a second reading might be that although Agesilaus had to some extent been abandoned by the gods, because he had been injured, he nevertheless carried out his religious duties. However, we do not learn anything else about his wounds or their consequences in this biography. Following the tradition of classical authors, Xenophon does not dwell on injuries, as if they still involved a sort of shame. Apparently, however, Agesilaus was never defeated[53] and continued the struggle to maintain Sparta's influence in Greece.

Even Plutarch's *Life of Agesilaus* states that the king tried to hide his lameness[54] and never used it as a pretext for withdrawal from any task.[55] The reason for this discretion may lie both in the importance which the Spartans' religious beliefs attached to physical integrity, especially regarding their kings,[56] and in the heroic state of mind that was still important in Laconia. Nevertheless, Agesilaus reigned for forty years (from ca. 398 to 359/8), had power and authority, and was held in great respect. Although his disability was not the consequence of a war wound,[57] this did not undermine his ability to reign, as long as it did not prevent him from leading the army.[58] But his attempts to hide his lameness surely show that he still acted according to the traditions of the classical period.

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[51] Xenophon, *Agesilaus*, 2, 13: Ὁ δὲ καίπερ πολλὰ τραύματα ἔχων πάντοσε καὶ παντοίοις ὅπλοις ὅμως οὐκ ἐπελάθετο τοῦ θείου. The exact phrase again in Xenophon, *Hellenica*, 4, 3, 20. Also *Agesilaus*, 6, 2: σαφῆ δὲ καὶ αὐτὸς σημεῖα ἀπενεγκάμενος τοῦ θυμῷ μάχεσθαι, "bearing in his own body visible tokens of the fury in his fighting". Xenophon continues: "so that not by hearsay but by the evidence of their own eyes men could judge what manner of man he was".

[52] Xenophon, *Hellenica* 4, 3, 21: he also consacrated a magnificent gift to Apollo in Delphi.

[53] So Plutarch, *Vita Pompei* 84, 1 (comparison between Agesilaus and Pompeius).

[54] Plutarch, *Vita Agesilae* 2, 3: τὴν δὲ τοῦ σκέλους πήρωσιν ἥ τε ὥρα τοῦ σώματος ἀσθοῦντος ἐπέκρυπτε.

[55] Plutarch, *Vita Agesilae*, 2, 3: Πρὸς μηδένα πόνον μηδὲ πρᾶξιν ἀπαγορεύοντος διὰ τὴν χωλότητα.

[56] An oracle warned against a lame kingship (Plutarch, *Vita Agesilae* 30, 1, cf. Parker (1996), 277). The necessity of physical integrity to honour the gods is far more important in the Roman tradition, cf. Baroin (2009), and Baroin (2002).

[57] The king limped after an accident. Plutarch, *Vita Agesilae* 3, 8 does not come up with any circumstances, and says only that he had προσπταίσας τὸν πόδα ("was injured in the foot").

[58] At the age of 80, shattered, he still intended to start another expedition: Plutarch, *Vita Agesilae* 36: καὶ πᾶν ὑπὸ τραυμάτων τὸ σῶμα κατακεκομμένος.

The religious conception of an exchange of gifts between men and gods may explain the sacrifice of his own body that Philip was ready to make, to compensate for the great fortune of military dominance over Greece: it expressed the fact that good luck was immediately envied by the gods and had to be balanced by some misfortune. To return to Demosthenes' *On the Crown*, Philip's injuries come in exchange for empire (*arkhe*) and dynastic power (*dunasteia*), and for the sake of honor (*time*) and fame (*doxe*).[59] But the important difference is that in Demosthenes' eyes, it is the political rather than the religious consequences of Philip's behaviour that matter. Was this attitude manifest in Macedonia itself at the time?

4.2. *A Trained Warrior or a Disabled Commander?*

Macedonia was a military state. Physical training was required from all men, and military exercises are known to have been part of its institutional tradition. The king's personal authority lay therefore in his ability to stand in front of his men and lead not only the war[60] but also the kingdom, keeping an eye on the *hetairoi*. His power was reinforced by the almost permanent warfare that maintained his position. The ancient authors all praise Philip's outstanding qualities as a general, especially his quick-wittedness.[61]

Understandably, Philip tried as hard as he could to make light of his disabilities, and to act as first among Macedonians in all circumstances. Far from expressing a religious relationship with the gods or Tyche, Philip's determination to achieve his project was even reinforced by the obstacles his disability presented, whatever it may have cost him. For Demosthenes, Philip seemed no less dangerous to the Athenians with his disabled body. Quite the contrary: it made his political will appear far stronger and more threatening. So the psychological explanation—that the sacrifices and pain reinforced Philip's determination—prevailed at that time. Demosthenes used it to convince his fellow citizens to declare war on the Macedonian king, that dangerous Barbarian.

In a famous passage, Plutarch lists four one-eyed kings or generals and forces his audience to the conclusion that they were some of the best warriors:

59 Thus the text of [Demosthenes'] letter in answer to Philip (22), stating that in order to increase his kingdom he had been ready to sacrifice his body: φιλοκίνδυνον ὥσθ' ὑπὲρ τοῦ μείζω ποιῆσαι τὴν ἀρχὴν κατατετρῶσθαι πᾶν τὸ σῶμα τοῖς πολεμίοις μαχόμενον.

60 "In war, the king fought alongside his men, on horseback or on foot," see Hammond (1989) 65.

61 Diodorus Siculus, *Bibliotheca* 16, 1, 6: ἀνχινοῖα στρατηγική.

"The generals most involved in war (πολεμικώτατοι) and those who have accomplished a great number of deeds through tricks and skill were one-eyed (ἑτερόφθαλμοι),[62] so Philip, Antigonos, Hannibal and […] Sertorius".[63] Philip is undoubtedly still *polemikôtatos* and in good physical condition when at the age of 44 he beats the Greek coalition in Chaironea, in 338. We cannot know, of course, the extent of Philip's physical engagement during this battle, but far from being *adunatos* or incapable,[64] he certainly showed an intact *dunamis* (force, power).

Antigonos I (383–301), who was the same age as Philip, unsurprisingly reacted in a similar way. Having lost one eye, he was called Monophthalmos.[65] How and when it happened is not clear. No historian seems to know whether it was accident or illness,[66] and recent monographs on the self-proclaimed king emphasise his military deeds and political role, sidelining his physical appearance. The only indication that, like Philip, he wanted to hide his disability is a note by Pliny the Elder,[67] which reminds us that Antigonos was always pictured on portraits[68] or coins in profile, on his 'good' side. His epithet became his name, as is frequently the case, though he was probably also designated by the nickname of Kuklôps.[69] What we do know for sure is

62 They are said ἑτερόφθαλμοι. For Esser (1934), ἑτερόφθαλμοι and μονόφθαλμοι, are perfect synonyms, but there may be a difference, μονόφθαλμος being from birth or childhood on as Pollux, *Onomasticon*, 61–62 explains, μονόφθαλμος is said ἐπὶ τῶν ἐκ φύσεως ἕν ἐχόντων ὀφθαλμὸν, οἷον Κυκλώπων καὶ 'Αριμασπῶν. Herennius Philo, *De diversis verborum significationibus*, letter E, 62 confirms: ἑτερόφθαλμος καὶ μονόφθαλμος διαφέρει· ἑτερόφθαλμος μὲν ὁ κατὰ περίπτωσιν πηρωθεὶς τὸν ἕτερον τῶν ὀφθαλμῶν, μονόφθαλμος δὲ ὁ μόνον ὀφθαλμὸν ἐσχηκώς, ὡς ὁ Κύκλωψ.

63 Plutarch, *Vita Sertorii* 1, 8: Τῶν στρατηγῶν οἱ πολεμικώτατοι καὶ πλεῖστα δόλῳ κατεργασάμενοι μετὰ δεινότητος ἑτερόφθαλμοι γεγόνασι, Φίλιππος, 'Αντίγονος, 'Αννίβας καὶ … Σερτώριος.

64 Samama (2009).

65 On the adjectives *mono-* or *heterophthalmos*, see Esser (1933).

66 Briant (1973) writes on political history and Billows (1990) 28–29, followed by Lascaratos (1999), asserts that, according to Plutarch (*Vita Alexandri* 70), he had been wounded in his youth, when he fought on side of Philip II at the battle of Perinthos in 340. But this wrongly assimilates Antigonos, future king, with a certain Antigenes, who also suffered the loss of an eye, certainly a common disability among soldiers.

67 Pliny, *Naturalis Historia* 35, 90: "He also painted a portrait of King Antigonos, who was blind in one eye, and devised an original method of concealing the defect, for he did the likeness in 'three-quarter,' so that the feature that was lacking in the subject might be thought instead to be absent in the picture; he only showed that part of the face which he was able to display as unmutilated".

68 Quintilian, *Institutio Oratoria* 2, 13, 12: "In a painting, the whole face is shown: but Apelles painted Antigonos from the side (in profile), to hide the deformity of his lost eye".

69 Aelian, *Varia historia* 12, 43: "The son of Philippos, Antigonos who was one-eyed, and therefore, called the Cyclop …" follows Douris.

that he died at the battle of Ipsos during the summer of 301, at the age of 81; apparently, his missing eye had had no effect on his military and political career.[70]

4.3. *Wounds Exhibited as Proof of Courage*

It therefore seems that neither lameness nor loss of an eye hindered Agesilaus, Philip or Antigonos from their military and political tasks as kings. From the remaining texts, we learn that they did not pride themselves on their scars or war wounds. On the contrary, Philip grumbled about them. Thus Plutarch: 'Philip, fighting against the Triballoi, had his thigh hit by a spear and, although he was cured, he could not bear being lame.'[71] Antigonos insisted on hiding the fact that he was one-eyed. In this sense, they still act like men of the classical period, neither boasting about nor taking advantage of their physical scars.

However, it seems that within a single generation the view of distorted bodies had radically changed. From Alexander on, each scar is definitely understood to be proof of courage and exemplary skill, which the warrior is proud to show[72] because they manifest his *arete*. Arrian reports how Alexander challenged his troops[73] in 325 by inviting them to show their scars as *indicia uirtutis*:

> Come now, whoever of you has wounds, let him strip and show them, and I will show mine in turn; for there is no part of my body, in front at any rate, remaining free from wounds; nor is there any kind of weapon used either for close combat or for hurling at the enemy, the traces of which I do not bear on my person. For I have been wounded with the sword in close fight, I have been shot with arrows, and I have been struck with missiles projected from engines of war; and though oftentimes I have been hit with stones and bolts of wood for the sake of your lives, your glory, and your wealth, I am still leading you as conquerors over all the land and sea, all rivers, mountains, and plains.[74]

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70 It is noticeable that no defeat was ever assigned to a commander's physical disability, except for Crassus' short sight which caused him to miss the movements of the troops and ruined his position (Plutarch, *Vita Bruti* 43, 4: ἦν γὰρ ἀσθενὴς τὴν ὄψιν).

71 Plutarch, *De fortuna Alexandri* 331c: Τοῦ δὲ πατρὸς Φιλίππου λόγχῃ τὸν μηρὸν ἐν Τριβαλλοῖς διαπαρέντος, καὶ τὸν μὲν κίνδυνον διαφυγόντος, ἀχθομένου δὲ τῇ χωλότητι.

72 Curtius Rufus, *Historiae* 9, 3, 10: *Intuere corpora exanguia, tot perfossa uulneribus, tot cicatricibus putria*. "Look at our exausted bodies, shattered by so many injuries, distorted by so many scars", is the request from the veterans to Alexander in 325 after so many ordeals.

73 Arrian, *Anabasis Alexandri*, 7, 10, 1: ἄγε δὴ καὶ ὅτῳ τραύματα ὑμῶν ἐστὶ γυμνώσας αὐτὰ ἐπιδειξάτω καὶ ἐγὼ τὰ ἐμὰ ἐπιδείζω ἐν μέρει: "Come now, whoever of you has wounds, let him strip and show them, and I will show mine in turn".

74 Arrian, *Anabasis Alexandri*, 7, 10, 2 quoting Alexander's speech to his troops in 325: ἄγε

All shame has vanished. Alexander's body becomes a visible and living emblem of his military worth and is considered an εἰκών. Plutarch summarizes: 'He [Alexander] did not cover over nor hide his scars, but bore them with him openly as symbolic representations, graven on his body, of virtue and manly courage.'[75] To imitate the king, *hetairoi* and soldiers also compete to show their courage and accumulate injuries, sometimes even voluntarily.[76]

And in Plutarch's time, disablement due to war wounds is definitely considered a sign of military worth. To his father, grumbling about his pain and his limping, Alexander answers: 'Be of good cheer, father, and go on your way rejoicing, that, at each step, you may recall your valour (*arete*).'[77] We had to wait for Alexander—and Plutarch—to see Philip taking pride in his wounding.[78] His disability became so famous that, by the second century BCE, it had turned into a topic for rhetorical exercises: 'Which of Aphrodite's hands did Diomedes hurt?' induced the question: 'Which was Philip's limping leg?'[79] In Plutarch's time, recalling the lame king had evolved into a scholarly occupation, and Philip is neither suspected as

δὴ καὶ ὅτῳ τραύματα ὑμῶν ἐστι γυμνώσας αὐτὰ ἐπιδειξάτω καὶ ἐγὼ τὰ ἐμὰ ἐπιδείζω ἐν μέρει· ὡς ἔμοιγε οὐκ ἔστιν ὅ τι τοῦ σώματος τῶν γε δὴ ἔμπροσθεν μερῶν ἄτρωτον ὑπολέλειπται, οὐδὲ ὅπλον τι ἔστιν ἢ ἐκ χειρὸς ἢ τῶν ἀφιεμένων οὗ γε οὐκ ἴχνη ἐν ἐμαυτῷ φέρω· ἀλλὰ καὶ ξίφει ἐκ χειρὸς τέτρωμαι καὶ τετόξευμαι ἤδη καὶ ἀπὸ μηχανῆς βέβλημαι, καὶ λίθοις πολλαχῇ καὶ ξύλοις παιόμενος ὑπὲρ ὑμῶν καὶ τῆς ὑμετέρας δόξης καὶ τοῦ ὑμετέρου πλούτου (translation after E.J. Chinnock).

75 Plutarch, *De fortuna Alexandri* 331c: οὐκ ἐγκαλυπτόμενον οὐδὲ κατακρύπτοντα τὰς οὐλάς, ἀλλ' ὥσπερ εἰκόνας ἐγκεχαραγμένας ἀρετῆς καὶ ἀνδραγαθίας περιφέροντα.

76 Curtius Rufus, *Historiae* 4, 16, 31–32: *Ne duces quidem copiarum sua laude fraudandi sunt; quippe uulnera, quae quisque excepit, indicia uirtutis sunt: Hephaestionis brachium hasta ictum est, Perdicca et Coenos et Menidas sagittis prope occisi.* "The commanders of troops must not be deprived of the praise they deserve; the wounds everyone of them received are proofs of his courage: Hephaestion was hit in the arm by a spear; Perdiccas Côenos and Menidas were nearly killed with arrows".

77 Plutarch, *De fortuna Alexandri* 331c: Τοῦ δὲ πατρὸς Φιλίππου λόγχῃ τὸν μηρὸν ἐν Τριβαλλοῖς διαπαρέντος, καὶ τὸν μὲν κίνδυνον διαφυγόντος, ἀχθομένου δὲ τῇ χωλότητι, θάρρει, πάτερ, ἔφη, καὶ πρόϊθι φανερῶς ἵνα τῆς ἀρετῆς κατὰ βῆμα μνημονεύῃς.

78 The anecdote of a man named Cleisophos, in Philip's entourage, covering his eye in sympathy with the king or limping in imitation is an obvious forgery. (Athenaeus, *Deipnosophistae* 6, 249a: "Satyrus, in his *Life of Philip*, says that when Philip had his eye knocked out, Cleisophus went along with him with his own eye bandaged in the same way. Again, when Philip was wounded in the leg, Cleisophus marched limping along with the king"). But what this shows is that the king's disabilities became not only characteristic but also worthy of imitation.

79 Plutarch, *Quaestiones convivales* 739b: ἀντερομένου ποτέρῳ σκέλει χωλὸς ἦν Φίλιππος. The parallel between the Iliadic episode of Diomedes hurting the goddess of love and Philip's wounding elevates the latter almost into a literary tale.

someone the gods have forsaken nor is he an exceptional figure among kings or commanders. Times had changed.

5. Conclusion

Undoubtedly the mistrust of mutilated bodies, based on the profoundly Greek idea that inner beauty is incompatible with visible decay, together with the superstitious fears involved in religious interpretations, gradually disappeared. This was especially true concerning kings and generals who, because of their military activity, were inevitably exposed to serious injuries that could alter their appearance. It seems that from Philip onwards, war injuries and scars received in formal battles were easily admitted as tokens of bravery. The implicit religious taboo fades away. As long as the king or general could stay on his horse and ride properly, he was able to fight and lead his men. This, first and foremost, was what mattered.

Following the lame god Hephaestus, myth has given any limping person a divine reference. Georges Dumézil studied, in Roman legends and German mythology, the association between the one-eyed and the lame that was embodied in various heroes, such as Horatius Cocles, putting forward the idea of a 'paradoxically qualifying mutilation'[80] in Roman thought. More prosaically in the Greek world, as most non-deadly wounds injured the legs or feet, it is obvious that lame people abounded in ancient times, as did those suffering from diseases of the eye.[81] Thus none of our kings was an exception in ancient society.

The Roman fascination with the body image of elder citizens as noble and tired, from the last years of the Republic to the first century CE, made it easier for soldiers to swagger around showing off their scars or mutilations. No doubt Plutarch, greatly influenced by his stay in Rome, adopted the new state of mind towards distorted or disabled bodies. He represents a synthesis of both traditions: on the one hand the Hellenistic need for a military leader to be the best warrior, entailing the risk of being injured and disabled; on the other hand, the Roman admiration for visible proof of *arete*, *virtus*, elevating scars into badges of courage. 'The others, said Sertorius, do not always wear

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[80] Dumézil (1978) 275.

[81] Ambulant disabilities came through the shortening of the muscles after an injury or a bad reduction of the bones in case of a fracture. In the Graeco-Roman world, the most frequent ailments concerned sight or mobility, as I have tried to show elsewhere, cf. Samama (2009) and previously Esser (1934).

the proof of their heroism: they sometimes lay down their necklaces, their spears and their crowns. But I always keep the distinctive signs of my courage: in my disability, they can see my bravery.'[82]

In this interpretation Philip II, king of Macedonia, emerges as the turning point: he still belongs to the classical period, because he tried to hide his disabilities, and because in the eyes of the Athenians he seemed ready for a sort of transaction with the gods: in the tradition of δῶρον vs. ἀντιδῶρον, he offered his body in exchange for power and increasing political dominance. But at the same time, because of his scars were numerous and visible, he became a primary emblem of the wounded king. Unwittingly, he opened the way for his son Alexander, so often injured, and for those *epigonoi* who gradually established the tradition of a king in arms whose very body was a living image of battles. For some of them, over the years, even lameness or *monophthalmia* came to be considered a possible source of pride.

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[82] Plutarch, *Vita Sertorii* 4, 3–4. Cf. Sallust, *Historiae* 1, 88: *corporis deshonestamento laetabatur* and the commentary by Gellius, *Noctes Atticae* 2, 27: "Philip is not shown, like Sertorius, rejoicing in bodily disfigurement". See Pailler (2000).

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DISPARATE LIVES OR DISPARATE DEATHS? POST-MORTEM TREATMENT OF THE BODY AND THE ARTICULATION OF DIFFERENCE

Emma-Jayne Graham

What did it mean to be 'disabled' in Roman antiquity? As all the contributions in this volume have shown, this is a complex and multifaceted question. This paper is concerned with two particular aspects of it. Firstly, what did it mean to experience a physical condition that limited, structured or otherwise affected a person's daily life, the activities they performed, their bodily comfort (i.e. pain levels or ability to walk), or the way in which they were viewed by other members of the community? How common were such conditions and might everyone find themselves at some point in their life on a sliding scale of physical impairment? If so, what are the implications for how ancient disability might be defined? The second relates to what these conditions or circumstances meant to the wider community—how did they perceive, experience, respond to and understand bodies that fell outside the parameters of 'normality'? This chapter will examine the extent to which we might begin to approach such questions from an archaeological perspective. Beginning with some comments concerning approaches to disability, as well as the evidence for debilitating physical changes within the communities of the Roman world and their implications for understandings of 'disparate' and 'normal' bodies, the discussion will turn to evidence for burial practice and the treatment of these bodies in death. Does this reveal anything about attitudes towards 'disabled' bodies and the social identities of the people they had once belonged to? What follows is not intended to be a comprehensive survey of either the palaeopathology of the Roman world or burial practice, instead it is hoped that by raising new questions and highlighting their potential for providing a different insight into concepts of disability, that new approaches might be prompted.

1. Disability: Definitions and Approaches

Studies of ancient disability have tended to approach the issue from one of two perspectives, which might be termed 'social' and 'scientific'. The

first takes a literary, mythical or artistic viewpoint drawing upon accounts and representations of disabled, and for the Roman world especially, often 'monstrous' or extremely deformed bodies from both the mortal and divine communities; the second draws upon osteological data to identify particular conditions or their extent and is in many ways more closely related to the study of ancient health and disease than the impact of disability on individuals and communities.[1] Neither considers the physical condition of the ordinary person who scraped a living and dealt with the difficulties of life in the pre-modern world, but who at the same time might be afflicted by a physical incapacity that precluded certain activities or marked them out as distinct from their peers. The monstrosities and curiosities that form the focal point of many studies are exactly that—extraordinary cases that had particular attention drawn to them because they were viewed as intriguing, special, or potentially dangerous. These were not the commonplace disabled of the Roman world, and yet the largely negative attitudes of fear, morbid curiosity and exploitation associated with them have sometimes been rather uncritically transferred to discussions of 'Roman disability' more generally.[2] The emphasis on the extreme in Roman accounts, in contrast to those of the Greek world, is noticeable, but perhaps when Roman authors wanted to stress bodily difference they were required to turn to the extreme in order for it to have an impact upon their audience. In other words, was attention perhaps drawn to these cases because levels of disability were such that the club foot of Hephaestus was no longer unusual enough to mark anyone out as particularly different? Does this reflect a wider context in which only extremes of disability were viewed as significant and might this be because physical incapacity was actually rather common? With this in mind, this chapter is concerned with exploring the physical limitations that affected otherwise ordinary people, many of them brought about by the stresses and strains of daily existence, occupation and encounters with disease, infection and trauma, which might in some cases have exacerbated underlying congenital conditions.

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1 Compare Garland (1995); Rose (1997 and 2003); Vlahogiannis (1998 and 2005) with Fox (2005); Giannecchini and Moggi-Cecchi (2008); Mays (2006); Roberts et al. (2005); Roberts and Manchester (2005); Scheidel (2010). See also Dasen (1993).

2 See Vlahogiannis (1998).

2. Palaeopathology, Burial and Identity

Palaeopathology, the study of past disease, has begun to feature prominently in recent discussions of ancient health and illness, revealing the extent of particular forms of congenital, infectious and traumatic skeletal pathologies.[3] These studies have shed light upon patterns of infection, medical treatment, types of illness, demography and the relationship between congenital conditions and those caused by infectious agents or trauma. To date, the geographical coverage of such an approach has been uneven and hampered by variable conditions of preservation—soil conditions produce inconsistent rates of bone preservation, evolving burial practices result in changeable types of bone assemblage for particular areas and periods, whilst the recovery of palaeopathological evidence from cremation burials is a comparatively recent advance. Furthermore, those who study ancient skeletal evidence are, understandably, often concerned primarily with the use of this data to quantify and catalogue diseases and forms of physical incapacity, their geographical and chronological spread and their connection with demographic profiles, thus distancing the skeletal material from the bodies to which it once belonged, their treatment in death and the impact of paleopathological changes on their lives and identities.

There has been little interaction between the social and scientific approaches, besides scholars from both groups bemoaning the fact that skeletal evidence is insufficient in terms of quantity or quality, often able to reveal only that certain conditions existed and their immediate biological impact.[4] The divide is apparent in Martha Lynn Rose's work on ancient Greece in which she distinguishes between a 'medical model' which considers disability from the perspective of the display of a number of physical conditions that mean 'one is automatically "disabled", and one's life is defined by membership in this deviant class,' and a 'community model' which views physical disability as a cultural construct based on the degree to which one can 'fulfil the tasks of membership in the community'.[5] Importantly her argument highlights how definitions of disability might shift 'according to one's socially prescribed

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[3] For an overview see Roberts and Manchester (2005) and Aufderheide et al. (1998); for examples of specific studies see Anderson (2001); Belcastro et al. (2007); Capasso (1999); Cucina et al. (2006); Facchini et al. (2004); Fox (2005); Giannecchini and Moggi-Cecchi (2008); Kron (2005); Laurence (2005); Mays (2006); Paine et al. (2009); Redfern (2010); Roberts et al. (2005); Salvadei et al. (2001); Scheidel (2010).

[4] Rose (2003) 5.

[5] Rose (1997) 35; see also Rose (2003); World Health Organization (2011b).

role'.[6] Nevertheless, there remains an essential divide between approaches focused on physical characteristics or medical conditions detected using scientific data, and cultural perceptions. However the social participation of which Rose writes was to some extent framed by the physical parameters imposed by a person's 'medical' condition. Indeed, it is in the dialogue between the two that we might begin to discern what 'disability' really meant and how ancient communities responded to the outward signs and limitations of physical impairment. This chapter therefore advocates a combined approach that explores this interdisciplinary middle ground by asking to what extent the data from palaeopathology and funerary practices can be used to answer 'social' or 'cultural' questions concerning attitudes towards, and treatment of, bodies that displayed physical disparity from the rest of the community.

Mortuary archaeologists argue that the manner in which a human body is disposed of can reveal something about the nature of a person's social identity in life, or provide an opportunity to renegotiate that identity through the manipulation of their presentation in death.[7] Death, funerals and remembrance activities provide a framework for public or communal statements about identity and status, offering a chance for the living to promote, change or deny that identity, or to fix it in such a way that prevents further changes in the future. As such, these acts reflect the attitudes, perceptions and understandings of the living in relation to concepts of personhood and identity, as well as their own place and that of the deceased within the community more widely. This has been well-established for Roman commemorative practices, in which the medium of a stone monument might be used to make public statements about the legal or social position of an individual or family.[8] Once these were set in stone it was difficult for anyone to question their validity, with their power revealed by instances in which such self-promotion might be denied or erased.[9] The occasion of death was therefore important for people who might not otherwise have an opportunity to make public statements about themselves, their loved ones or their communal identity. Monuments were a manufactured means of expressing these ideals but the treatment of the body

6 Rose (1997) 35.

7 Papers in Borić and Robb (2008); Brück (2001 and 2004); papers in Devlin and Graham (forthcoming); Fowler (2002 and 2004); Nilsson Stutz (2003); Thomas (2000); Williams (2003 and 2004).

8 Carroll (2011b); Hope (1998).

9 *Damnatio memoriae*: Carroll (2011a); Flower (2006).

could serve the same purpose. Choices were made about where and how to bury a person and unambiguous statements could be made by depositing it outside of the normal confines of the burial area or in a manner that was deemed unusual.[10] Valerie Hope has drawn attention to a number of ways in which Roman corpses might be abused or mistreated—the body itself acting as the focal point for the fear, disgust or anger of a community.[11] This continued into much later periods, with the bodies of executed criminals, suicides and other outsiders denied burial in Christian churchyards, or restricted to particular areas within them.[12] From a more positive perspective, body parts might be used in acts of communal remembrance as a way of honouring an important member of the group and renegotiating a place for them within it, even after death.[13]

As Vlahogiannis observes: 'our body, able-bodied or disabled, is our social self, our social location; it forms our identity within the world beyond'.[14] We experience life through our bodies, we understand the world through our bodily interaction with it, and other people understand us through their own bodily interaction with our bodies, in both life and death. In death, our material remains compel others to act in certain ways, requiring them to confront the materiality of the corpse and their cultural responses to it.[15] As a consequence, the dead body becomes the focal point for the actions of the wider community and through the decisions they make concerning its treatment they can confront, negotiate or make statements about their own identities and that of the dead and in doing so reveal and define their relationship with it and the social person to whom it once belonged. These choices reflect the concerns, hopes, fears and attitudes of the living—they offer the chance to exercise control over bodies that are considered unsettling, to reject them, or to perform activities designed to provide a sense of security and comfort for grieving relations.[16] As a consequence, it is also necessary to consider the extent to which this might have been connected with attitudes towards the nature of the specific body with which they

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10 Devlin and Graham (forthcoming); Murphy (2008); Reynolds (2009); Vaquerizio Gil (2009).

11 Hope (2000).

12 Reynolds (2009).

13 Fowler (2002); Graham (2009 and 2011); Hughes et al. (2010); Jones (2005).

14 Vlahogiannis (1998) 33.

15 Connor (1995); Graham (2011); Hope (2000); Nilsson Stutz (2003 and 2008); Williams (2004).

16 Graham (forthcoming a).

interacted. Given that 'permanent physical characteristics were personal, individual attributes that among other things established people's identity,'[17] it is possible that disabilities were taken into account during this process, potentially forming the focal point for identity after death, as much if not more, than they may have in life. We might ask then, at what point did disability become something that was highlighted or emphasised in the context of funerary ritual in terms of bodily treatment, ritual practice or location?

3. Experiences of the 'Normal' Roman Body

Before this can be answered it is necessary to establish what might be considered 'normal' or largely 'disparate' in terms of Roman bodies. Anthropological data obtained from recent excavations in Italy has revealed a pattern of generally poor health, limited life expectancy, high levels of trauma and infection and poor childhood nutrition.[18] This pattern has been revealed clearly for the community that made use of two Imperial-period cemeteries at Urbino, Italy.[19] In addition to generally low levels of health and poor nutrition, it was found that 83.3 % of adult males and 85 % of adult females exhibited evidence for at least one skeletal lesion.[20] Bone lesions (periostitis) involve the infection and inflammation of the tissue surrounding bone with the impact on the bone itself considered to be a manifestation of chronic infection exacerbated by excessive physical activity (fine pitting, longitudinal striation and new bone formation on the cortical surface).[21] Although periostitis will not necessarily have proved crippling it causes swelling and pain, and frequently affects the tibia, making walking difficult. High levels of arthritis were also detected, with 47 % of adult males and 58 % of adult females suffering from osteoarthritis, in addition to 38 % of males and 42 % of females demonstrating evidence for further trauma or strenuous labour in the form of vertebral nodes.[22] The study concluded that the overall trauma rate for the entire adult population could be classified as high. The authors of the study stress that

17 Rose (1997) 38.

18 For a general overview of health see Scheidel (2010) especially Table 1; for individual studies on health and diet see Cucina et al. (2006); Facchini et al. (2004); FitzGerald et al. (2006).

19 Paine et al. (2009).

20 Paine et al. (2009) 197; for a full breakdown of pathologies see Paine et al. (2009) Table 4.

21 Roberts and Manchester (2005) 167 and 172–173; Aufderheide et al. (1998) 179.

22 Paine et al. (2009) 197.

these findings are consistent with chronic ailments associated with poor living conditions and dietary deficiencies, attributing it to the economic burdens placed on Urbino by the need to support the expansion and maintenance of the Empire.[23] Indeed life expectancy at birth was extremely low, between 24.8 and 26.6 years, which the investigators point out puts it on a par with Neolithic populations.[24] Urbino was an urban area but for these people life involved a high degree of strenuous agricultural and production related activities and injuries that we might more readily anticipate for a poor rural community living at the limits of subsistence. The majority were affected by some degree of physical incapacity, ranging from periodic pain to severe difficulties with movement. These were long-term conditions too, for as Roberts and Manchester observe 'for occupationally related changes to show, the person must start the activity young.'[25] Life was clearly harsh for the people of Roman Urbino and their bodies exhibited the results.

Urbino was far from unique in terms of its supporting role for the Empire and its palaeopathology. A recent study of seven Imperial sites in the Roman *suburbium* found that the average life expectancy fell somewhere between 20 and 40 years of age.[26] Evidence for physical stress linked with heavy occupational activities was present across all age and sex groups, with the few who did survive beyond 50 showing particularly high levels of discrete physical stress to the spine.[27] The investigators concluded that although conditions of life and health were low, they were not critical and the difficulties of making clear distinctions between different cemetery sites suggests that the picture presented is relatively typical of the modest social classes as a whole.[28] Palaeopathogical data from the Via Collatina, another necropolis within the *suburbium* of Rome (see below), reveals comparable patterns of low life expectancy and strenuous lives that left a lasting mark on the bodies of the community and their physical capacities. Here, life expectancy was also 20–40 years for just under half of the population, 35 % showed evidence of trauma, and 20 % presented evidence for at least one fracture.[29] Nutritional deficiencies and low levels of overall health can be seen in the fact that 92 % were affected by enamel hypoplasia (caused by

23 Paine et al. (2009) 206.
24 Paine et al. (2009) 195.
25 Roberts and Manchester (2005) 144.
26 Catalano et al. (2001); also Catalano et al. (2006).
27 Catalano et al. (2001) 134.
28 Catalano et al. (2001) 137.
29 Buccellato et al. (2008b) 29.

nutritional stress in childhood)[30] and 77 % had porotic hyperostosis (whereby the bone tissue of the skull appears spongy).[31]

Away from Rome and the funerary context can be found the famous skeletons discovered on the beach at Herculaneum in the 1980s. These showed evidence for participation in heavy physical labour, perhaps related to agriculture or activities associated with fishing, sailing and the operation of a busy port. Indeed, 41.3 % of the men displayed evidence of extreme physical stress in the area of the head, shoulders, upper limbs and spine that might be related to heavy lifting, rowing or ploughing. Women (6.5 %) and children (11.5 % of those aged below 15) showed similar evidence for pathological abnormalities, with some as young as 7–10 exhibiting signs of serious injury. A child of only 5-years-old also bore the early signs of paleopathological changes which may hint at involvement in occupational activities from a very early age—something which is attested by written sources for other children in the Roman world, both slave and free.[32]

Further occupation-specific information is provided by an Imperial period necropolis at Casal Bertone, in the hinterland of Rome. This site was located close to a *fullonica*/tannery which probably provided employment for the majority of the population buried in the cemetery.[33] The investigators reported high levels of strenuous activity in 90 % of the adult sample, the nature and anatomical location of which points towards the types of physical activity that would have been performed in the tannery, particularly the trampling of cloth. In addition to spinal lesions comparable with those at other sites, there were notable alterations to the upper and lower limbs, including collarbone fractures and enthesopathy (erosion at the attachment of the costoclavicular ligaments) causing tendonitis, and numerous enthesophytes (abnormal bony projections at the attachment of a tendon or ligament) of the femurs, the distal ends of the tibia and the fibula close to the heel—all indicative of heavy pressure applied to the feet.[34] Once again we are reminded that for such skeletal abnormalities to form strenuous activity must have begun at an early age, and there is evidence for similar abnormalities in 45 %

30 Aufderheide et al. (1998) 405–407.

31 Aufderheide et al. (1998) 348; Buccellato et al. (2008b) 29.

32 Capasso (2001), 1028–1031; see Laes (2008) for a detailed discussion of the evidence for child labour across the Roman world and its implications for the bodies of both slave and freeborn children, including Appendix 1 for a summary of the osteological evidence from Herculaneum.

33 Musco et al. (2008) 39.

34 Musco et al. (2008) 39.

of the subadult skeletons, as well as 85 % of the female sample.[35] Not only did the bodies of these people and their fellows at Herculaneum and other sites across Italy suffer as a result of their occupation, but this was something that happened from an early age and continued even once they had developed to a point that is likely to have produced both pain and physical difficulties. We should note, for example, that the pain caused by tendonitis is usually worse during and after activity.

This presents only a sample of the potentially debilitating conditions experienced by non-elite members of Roman society. In each case the specific symptoms remain largely inaccessible, but for many they involved pain or discomfort and for others they hampered movement. All are likely to have become progressively worse. They provide a glimpse of the 'range of conditions to which the human body was always susceptible,'[36] but are they disabilities? From Rose's 'medical' perspective these conditions conform to modern concepts of disability as established by the World Health Organization:

> Disabilities is an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations.[37]

From our modern perspective too, as individuals with access to adequate medical care, we might consider constant, sometimes debilitating, pain as a central characteristic of disability. Certainly, if we were to suddenly find ourselves in the bodies of an individual from Casal Bertone we might well consider ourselves to be disabled! However, the key term here is 'difficulty'. The tannery workers at Casal Bertone experienced physical 'difficulties' in the course of their daily activities but this does not seem to have prevented them from continuing with them regardless of their suffering. From the standpoint of the Roman world these people cannot be considered 'disabled' in terms of conditions that prevented work or excluded them from the socio-economic community. Neither, in this sense, do they conform fully to the 'community model' in which disability is linked to the extent to which one can 'fulfil the tasks of membership in the community'.[38] These people who suffered

35 Musco et al. (2008) 39.
36 Rose (2003) 98.
37 WHO (2011a).
38 Rose (1997) 35.

physical impairments were still able to participate fully in economic activities and even if we cannot be certain they were not excluded from various social positions, their modest status would have already precluded the holding of religious or political office.

This also has broader implications. As noted above, we experience the world through our bodies and we understand our place in it through bodily experience—movement, emotions, smells, sights, sounds, performance, experiences of space, place, landscape and architecture.[39] Palaeopathology suggests that the majority of Romans experienced the world from a less than perfect bodily perspective, meaning that the experiences of many will have been mediated by physical limitations and the lens of pain and discomfort.[40] Acknowledging that there was considerable scope for disparate experience amongst the bodies of the Roman world complicates the picture but also brings it much closer to reality than simply inserting the modern body into a Roman environment. The vast majority of Roman people's lives were evidently affected by all manner of physical impairments or difficulties. These might vary in terms of severity, extent and consequences, but the 'normal' body of the Roman world was one that was far from completely able, far from modern concepts of 'normal'. It was against this background that they would have judged the bodies of others and as a consequence *this* is the context in which we need to place definitions of Roman 'disability', not against the perfect pain free body with which we are more familiar. Disparity was actually the norm.

4. Disparate Bodies, Disparate Deaths?

The ideas presented above counter claims that 'able-bodiedness is the primary point of reference for disability, based on the notion of an ideal body without blemish or fault,' and that 'disability was linked with aberrations of nature … The disabled were less than able. They represented misfortune, bad luck, punishment'.[41] It is difficult to believe that everyone was thought to be suffering from divine punishment. However, if this was the norm,

[39] Bender (2006); Classen et al. (1994); Favro (1996); Graham (2009 and forthcoming b); Harris (2009); Harris and Sørensen (2010); Hurcombe (2007); Kus (1992); Mitchell (2006); Tarlow (2000); von Stackelberg (2009).

[40] The yet unpublished paper, delivered by Patricia Baker at the conference, dealt with this subject.

[41] Vlahogiannis (1998) 16 and 20; Vlahogiannis (2005).

at what point did disparity become 'disability'? Burial evidence may offer some answers, allowing us to investigate whether bodies with more severe disabilities received the same, or different, post-mortem treatment as those without and to assess the implications for attitudes towards these bodies. Data is scarce but some examples suffice to demonstrate the potential of such an approach.

Via Collatina, Rome

Excavation of an area of the necropolis of the Via Collatina, to the east of Rome, began in 1997 and included the recovery of more than 2,200 burials.[42] Many of these took the form of earthen graves covered with tiles (*alla cappuccina*) or bricks, whilst others were placed in small mausolea used for single depositions.[43] Burial at the site began in the second half of the first century and continued throughout the second century AD, with inhumation the dominant form of disposal, although cremation burials are present.[44] In line with contemporary practice elsewhere, grave goods were not always deposited and those that were tended to be modest. One mausoleum is of particular interest to this investigation. Mausoleum 2 (Area III) is of a similar model to two slightly smaller tombs nearby (M1 and M3) but is set back from the road and contained four inhumations.[45] Some heavily fragmented burnt human bones, broken ceramics, 31 iron nails and soil rich in carbon and ash were also deposited within a dolium set into a circular masonry feature near the centre of the tomb—probably re-deposited debris from the site of an unidentified *ustrinum* (pyre site) rather than a discrete burial. The same may be true of similar debris found in a small pit in the north western corner of the tomb.[46]

The earliest inhumation (T5) was that of a male, aged approximately 30, who was placed in a grave (without a cover) in the southern area of the tomb. The man was slightly too tall for the space and his head and shoulders were propped against one end, leading the excavators to suggest that it was a reused grave—a conclusion supported by the recovery of hand and foot bones belonging to another individual. The skeletal remains reveal that the man was very robust, with developed muscle attachments indicating

42 Buccellato et al. (2008a) 59; also Buccellato et al. (2008b).
43 Buccellato et al. (2008a) 63.
44 Buccellato et al. (2008a) 63–64.
45 Buccellato et al. (2008a) 64.
46 Buccellato et al. (2008a) 69 and 73.

strenuous physical activity, especially for the legs. However, a number of serious pathological changes were also noted, including periostitis and signs of trauma on the right tibia and a number of severe changes to the skull, including a curvilinear groove of 20 mm on the right frontal bone, and deformation to the right orbit and the jaw bone. His cheekbone (zygomatic) was also deformed by a bone callus (caused by the healing of a fracture) and the palate and front teeth were pushed forward creating a marked prognathism. Most of the upper posterior teeth were lost during the course of his lifetime, probably the result of the fractured jaw, and the remaining teeth presented caries and wear caused by the misalignment of the jaw. Evidence for bone resorption showed that he had survived two blunt head injuries, which may have also contributed to the fusing of the third cervical vertebra (at the base of the skull).[47] The excavators note that these head injuries would have severely altered his facial features—in addition to the prognathism he probably bore deep scars as well as crooked and bulging teeth.[48]

This grave was damaged by the construction of the structure containing pyre remains which, in turn, was cut by a later inhumation burial (T1) with an intact cover of mortared tufa and *cubilia* (the wedge-shaped bricks used to create the *opus reticulatum* walls of the tomb) over a gable of three pairs of bipedali. This well-constructed grave, which contained no grave goods, housed the remains of an adult male, aged 20–30 years, with a robust and muscular frame.[49] The body, which appears to have been wrapped partially in a shroud showed no evidence for pathological changes.[50]

Another individual (T2) buried in the south eastern corner of the tomb was covered with a similar cover (two Severan stamps providing a *terminus post quem*) and also lacked grave goods. The skeleton belonged to a male, aged 20–23 years with a robust stature and signs of participation in strenuous physical activity. The skeleton of this individual had suffered a number of pathological alterations, with evidence for chronic rhinitis and decayed or missing teeth, with those remaining showing signs of enamel hypoplasia and heavy wear. The right humerus was 5 cm shorter than the left, with a head that was twisted and crushed as a result of congenital chondrodysplasia, which also affected his spine. This also showed evidence for a number of other alterations—hernia, erosion, compression and osteochondrosis which

[47] Buccellato et al. (2008a) 64–68.
[48] Buccellato et al. (2008a) 73.
[49] Buccellato et al. (2008a) 69.
[50] For shrouds see Graham (forthcoming a).

can cause kyphosis (fusing) and lead to a hunchbacked appearance. He also suffered from mild arthritis. The investigators note that chondrodysplasia is a relatively rare condition but might be associated with other anomalies, such as cardiac disorders, mental retardation, skin lesions and other facial abnormalities, although the presence of these cannot be determined from the skeletal remains. They also note that although these conditions would have resulted in impaired posture and gait, causing the individual a considerable degree of disability, there are indications of hyperactivity in both upper and lower limbs suggestive of participation in repetitively strenuous activities.[51]

The fourth inhumation (T4) was recovered from the northern part of the tomb and placed into a very small, oval-shaped grave. The remains belonged to an adult woman, aged 45–55 buried in a foetal position. She seems to have been pressed with some force into a space that was too small—her right arm and hand were broken and bent unnaturally below her body, her left arm was flexed under her chin, and her skull appears to have been fractured in the process. The excavators suggest that the burial occurred outside of the interval between the onset (3–4 hours) and disappearance (several days) of rigor mortis in order for it to be possible to manipulate the body. Given the apparent haste with which the grave was prepared it was probably done very soon after death. The woman had suffered from severe ankylosing spondylitis, a chronic disease causing the fusing of the spine, and the majority of her vertebrae were fused into an S-shaped curve, forcing her to adopt a bent posture with her head projecting forward. This was a long-term condition as indicated by other anatomical deformities caused by incorrect posture. The woman had also lost most of her teeth during the course of her comparatively long life, and only a single worn and decayed incisor remained.[52]

The excavators of the mausoleum suggest that it was selected for these burials because it was slightly larger than those nearby and had seemingly fallen out of use (implied by the re-use of *cubilia* and the build up of soil levels), and that over time communal memory lent it a character suitable for the burial of individuals with severe deformities.[53] The burials in this mausoleum also provide an excellent opportunity to consider some of the issues outlined above concerning different degrees of disparity and how this might have been dealt with in death. These three individuals not only experienced severe physical incapacities during the course of their lives

51 Buccellato et al. (2008a) 70–73; Aufderheide et al. (1998) 360.
52 Buccellato et al. (2008a) 72–73; Aufderheide et al. (1998) 102–104.
53 Buccellato et al. (2008a) 73–75.

but also displayed them in a conspicuous way. These were not people who suffered from arthritic pain or tendonitis but soldiered on with no apparent external signs of that disability, but people who looked noticeably different—clearly deformed, with curved spines, prognathism, upturned faces, facial scarring and unusual gait. Was it this that marked them out as 'different'? Were their disabilities more visible, unavoidable and potentially disturbing than those of the majority? The fourth individual (T1) does not seem to fit into this pattern, and although it remains impossible to prove, it might be suggested that he suffered from a condition that did not manifest itself in the form of skeletal abnormalities—a skin or mental affliction perhaps. His inclusion within the group certainly appears to have been intentional. The possibility of the other three individuals also suffering from mental disorders, possibly associated with their physical conditions, should also not be overlooked.

To what extent did these individuals receive differential treatment in death and can that be connected with their physical (and perhaps mental) conditions? The first difference can be found in the use of a mausoleum for multiple burials in a necropolis in which single burial was the norm. Barring potential family connections (which seem unlikely) the decision was made to bury these individuals together, although the intercutting of graves suggests that there may have been substantial intervals of time between each interment, raising the possibility that these individuals had very little connection during life. Using the tomb for collective burial signalled that the structure and the individuals within it belonged to a community that was distinct from the rest of the cemetery population. They were denied 'normal' individual burial and were ascribed their own group identity. Uniting their abnormal bodies under a single roof therefore appears to have expressed and highlighted a perceived bodily connection that may even have existed only in death. Whether such a decision was taken by the family of the deceased, who may have wished to bury their relative apart from the rest of the family, or by the wider community remains open to speculation. Gathering them in a single structure may also have been viewed as a way of containing any malevolent or potentially fearful forces associated with them. Vlahogiannis has argued that disability was a punishment and might be associated with evil or dangerous forces.[54] Clearly this was not the case for the ordinary disparate bodies of the community, but was there a fear that such forces might be

[54] Vlahogiannis (1998) 20.

unleashed upon the death of these severely impaired individuals, hence the need to contain and maintain control over them? Perhaps that explains why T4 received such rapid burial. Any mental disorders that they displayed may also have contributed to the unease that was felt about them and the need to restrain them. In terms of their location and the company that they kept in death, it can therefore be argued that these individuals were marked out as somehow different, as something that needed to be contained and controlled.

This sense of 'difference', of separation from the majority, can also be seen in other aspects of their treatment. Firstly, the tomb was reused—they were not honoured with a new structure and there was considerably less investment made in the construction of their eternal home than there might be for other (although probably not all) members of the wider community, even to the point that two of them received no protective cover. Secondly, the tomb selected was set back slightly from the road, perhaps in order that it might not attract attention. We should also note the foetal position of T4 which is unusual for the Roman period—most inhumations are either supine (on the back) or occasionally prone (on the front; see below) but are generally extended. In this instance those responsible for digging the grave (gravediggers (*fossores*) or relatives?) probably knew that only a relatively small pit was required for such a bent frame and simply underestimated the dimensions. Nevertheless, they did not extend it once it became apparent that the body was too large (and we can assume that they had digging tools with them because the grave was backfilled immediately), instead they judged it appropriate to force the body into the space. This is remarkably misaligned with evidence for contemporary inhumation burials, which appear to have stressed the comfort of the corporeal form in the grave, with pillows, coffins and libation facilities.[55] The body of this woman was evidently not viewed in the same way.

The presence of pyre debris within the mausoleum may also be significant, hinting at the possibility that this burial space was viewed as a place for problematic or difficult to define material. An *ustrinum* was a reusable structure in which pyres could be lit, with the incinerated remains collected for burial elsewhere. In many cases only a sample of cremated remains would be collected, with a number of bones presumably left at the site of burning.[56] The area of the *ustrinum* would therefore need to be cleared out

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55 Graham (forthcoming a).

56 McKinley (1989, 1994a, 1994b, 2000 and 2006); Noy (2000); Williams (2008).

periodically as the debris of multiple burnings accumulated (ash, carbon, charcoal mixed with fragmented pyre goods and skeletal elements). This debris posed a particular problem: it was more than simply waste material because it had been involved in the transformative rites of the funeral, it had close connections with the liminal aspects of death and the corpse, and it also contained human remains. This may have made it necessary to provide some form of proper burial and in many cases it might be buried in pits within the vicinity of the cemetery.[57] Here it was placed in a container inside the mausoleum, which provided the religious protection of a grave.[58] As a consequence, the mausoleum might have been viewed as a suitable place for the deposition of 'difficult' or potentially problematic material, and the presence of the burnt material, alongside inhumations of individuals who might be considered 'different', may be significant.

With this in mind it can be argued that these people, who suffered severe physical abnormalities but who were evidently involved with the economic, and presumably social, life of the local community, were marked out in death through the differential treatment of their bodies. They were separated from the wider community, given hasty burial, and enclosed together—maybe as a way of reinforcing, emphasising or controlling their difference. However, despite strong evidence for differential treatment these individuals were not completely stigmatised or rejected. Each was provided with a proper burial—they received an individual grave (whether it was the correct size or not), they were at least covered with earth,[59] some even received a well-constructed cover like those elsewhere in the cemetery, and unlike others they benefitted from the physical, religious and legal protection of the mausoleum itself. They were also inhumed in much the same manner as the majority of the cemetery population and although there are signs of a lack of care, most were placed and not thrown into the grave. T1, who may or may not have suffered from a similarly debilitating condition, was even wrapped in a shroud. None were accompanied by grave goods but neither were many of the other people interred elsewhere in the cemetery. These individuals may have been treated differently but they were not ejected entirely from the community—they

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[57] McKinley (1994).

[58] Clearly the tomb does not contain all of the pyre debris produced at the cemetery even though cremation was relatively uncommon by this period, and it might be speculated that the debris buried here was the result of the specific cremation of other severely disabled individuals, or an *ustrinum* that served this particular area of the very large cemetery, or even one that had been taken out of use for the final time and was being reclaimed.

[59] Kyle (1998); Horace *Odes* 1, 28.

were not denied burial (a definite sign of disrespect and the ultimate abuse of a person[60]), they were not buried outside the confines of the burial area, thrown haphazardly into the tomb or discarded as rubbish, and their bodies, although sometimes buried without due care, do not present evidence of post-mortem abuse.

This example can therefore be interpreted from two, potentially conflicting perspectives. We can view it as the separation of severely deformed individuals who may have displayed signs of mental impairment from the rest of the community, as punishment or the result of fear, and as something representing the 'other'. On the other hand, however, this treatment was not extreme and nor were their bodies were abused, rejected or denied burial. These individuals were evidently thought to be different, and were treated accordingly, but this treatment remained within established cultural norms. The underlying reasons for this are not entirely clear. It is easy to suggest that their mortuary treatment was designed to control them, to keep them away from others, to make a statement about how different they were. However, it might equally have been an act of kindness and thought to be in their best interests for them to be together in death because they were believed to share a common sense of identity and community. They may have been perceived to possess a connection that transcended relationships in life and gained significance in death—one that was grounded in their bodily experiences of the world and hence the afterlife.

What was it, then, that really marked these three (possibly four) individuals out as a community unto themselves, even if they actually had no real links during the course of their lives? All were able to work and show evidence for having done so, meaning that they were active members of the local community regardless of how they were perceived. Significantly, all three had disfigurements that affected their appearance, most notably their facial features (and the absence of bone abnormalities for T1 does not rule out disfigurement or scarring). Several may have suffered from conditions affecting their cognitive abilities. Maybe these, either separately or in combination, moved them across a dividing line between the other disparate bodies of the community and those that were 'disabled' or 'deformed'. In this respect disability might not be something that was restrictive in terms of what a person might do and the contribution they might make (although this was probably much harder for them), but how they appeared and how they acted. Assumptions that the disabled were stigmatised because they

60 Hope (2000); Kyle (1998).

could not contribute, and were seen with such distaste and contempt that they were rejected from the norms of society do not stand up in the face of this evidence. These people were evidently integral members of the local economic community regardless of what people thought about them. In this sense they were not 'dis-abled'. During life they may have benefitted from some form of (family?) support—the woman in particular must have received some form of assistance in order to reach the relatively old age of 45–55 with such poor health—but for some reason this did not continue after death. It was at this point that their condition posed a greater problem for the community. A family who invested significant care in life is likely to have done the same in death unless there was a compelling reason not to, suggesting that abnormal minds and bodies became a more significant problem once they were deceased.

In order to fully comprehend the significance of this remarkable case we require more information than is currently available. What, if any, was the relationship between these people in life—can we assume that they didn't know each other at all? Might they have belonged to a burial club (*collegium*) that catered for those with similar conditions and would provide some form of burial if the family would not? What was the time interval between their deaths and are we dealing with a discrete moment in which a number of afflicted individuals died within a few years of one another, or a tomb used over several decades? We also lack comparative examples, meaning that it is difficult to assess the extent to which the activity seen here was common. Nevertheless, it provides an intriguing insight into the potential of an approach based upon treatment of the disabled body in death.

Further Examples

Published examples that compare directly with that of the Via Collatina are difficult to find but scattered cases allow the picture to be broadened. Belcastro and Mariotti report the recovery of a male skeleton (T.130) with pathological traits indicative of club foot in necropolis B at Casalecchio di Reno (Bologna, 2nd–3rd century AD).[61] The skeleton displayed 'nearly complete ankylosis of the right hip joint together with other pathological traits'. One leg was incapable of touching the ground, creating 'severe difficulties of deambulation' with the use of a crutch evidenced by 'compressive forces, probably due to a weight-bearing function consistent with crutch use …

[61] Belcastro and Mariotti (2000).

present in the right elbow (the left was not preserved) and in both wrists and hands.'[62] The man seems to have been interred alongside the rest of the community and was not treated in a manner suggestive of segregation or discrimination. It may be significant that his disability affected movement rather than having a major impact upon his appearance. As Garland notes, 'many people must have relied on crutches and sticks to move about.'[63] In this respect T.130 was not particularly unusual and he apparently overcame these difficulties sufficiently in order for his condition to not pose any restrictions upon his the manner of his burial.

Noting that the practice of prone burial might often be associated with violent death, suicide, execution, accident and contagious diseases, Vaquerizio Gil draws attention to eleven Roman-period prone burials at Valentia, Spain (Republic to fourth century AD).[64] Amongst them were a number of very robust men with evidence of trauma, violence, leprosy and tuberculosis, leading to the proposal that they were buried in a manner which would avert the problems of disease. This example can be compared with one from Roman Britain (Alington Avenue, Waldron), which involved the prone remains of a young adult male with evidence for a failed amputation of the right humerus. The body was placed haphazardly and face down into a coffin, suggestive of a rather hasty burial, perhaps as a result of his untimely, potentially violent, death.[65] Nevertheless, he was placed in a coffin, the grave cut was regular and neat, and he was granted space within the cemetery itself.

Two individuals from Cádiz were also buried in an unusual manner during the second century BC.[66] The first, a male aged 25–35 (EF7, Teatro Andalucía), was deposited supine with his legs bent, on a bed of pebbles and covered with a layer of stones. Examination revealed a 'very spectacular' costal osteosarcoma (tumour) in his chest. Nearby another male, aged 35–39 (EF8), was also buried supine but with his head forced back by a large rock placed upon his neck and with stones across his body. This individual suffered from unifocal eosinophilic granuloma which was so severe that it affected the right parietal lobe to an extent that would have caused disability and mental illness. This condition, now known as Langerhans cell histiocytosis, is a slowly progressing inflammatory disease that causes painful bone swelling, and can produce severe skin rashes and eruptions. Vaquerizio Gil may be correct

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62 Belcastro and Mariotti (2000) 530–532.
63 Garland (1995) 126.
64 Vaquerizio Gil (2009) 208–210.
65 Redfern (2010) 460 and Fig. 12.
66 Vaquerizio Gil (2009) 216.

when he suggests that the burial rite and location might have been chosen to keep the bodies of these deformed individuals in the grave.[67] These two men have more in common with those from Via Collatina Mausoleum 2 than with the other examples noted above—they suffered from conditions that altered their appearance radically and unpredictably. In both cases we witness the segregation, if not complete rejection, of these individuals in a manner that may have been designed to control such unusual bodies in death.

5. Conclusions

Burial practice provides a cultural perspective on attitudes towards disparate bodies. Whilst a broad brush approach is sometimes necessary attitudes could vary greatly over space and time and were intimately connected with the nature and composition of the society and cultural context which gave rise to them. Since burial customs themselves are also connected to the cultural context in which they are performed, they offer an opportunity for a targeted approach that allows these nuances to be explored. It has been shown here that Roman attitudes towards disability were produced against a cultural backdrop of disparity, rather than perfection, with the human body being judged in accordance not necessarily with its ability to participate in socio-economic activities but on a sliding scale of disparity in which movement and physical abilities might be categorised separately from external appearance and aesthetics.

Individuals such as those from Mausoleum 2 on the Via Collatina were perhaps not thought of as ‘disabled’, at least not in a sense that we might understand or share—they were evidently ‘able’ to participate fully in economic (and possibly social) life despite their physical impairments and were not excluded from the community. Nevertheless, they were certainly considered to be somehow different when it came to death, and that difference appears to have been based primarily although perhaps not exclusively on their physical characteristics and appearance. The same might be said for EF7 and EF8 from Cádiz, whose treatment was likewise not extreme—their bodies were buried and not abused, mistreated or discarded—but simply different, in the same way that they themselves were perhaps thought to be. This provides a glimpse into ancient attitudes—if the punishment fits the crime then we can assume that these individuals were

[67] Vaquerizio Gil (2009) 216.

not viewed as outcasts, or as monsters, but as people whose bodies were not quite the same as everyone else's. Whilst this was manageable during life, the unease that their unusual corpses produced required the exercise of some form of control over the fate of their remains. Had they been ostracised from the community during life then they would not have died in the midst of a population willing (or needing) to at least dispose of their bodies. A particular place within the living community must have been carved out for them, perhaps in a similar way to those recorded for different cultures of the modern world. Benedicte Ingstad, a medical anthropologist writing about present day Botswana, reacts against the tendency of westerners to invent 'reasons' why people in developing countries are primitive and unenlightened, explaining that here disabled children are not 'hidden' by urban dwellers.[68] Indeed, it is much more likely that they will be sent back to the village, not because they must be kept away, but because here there is a more leisurely existence, non-strenuous labour in which some disabled people can take part and children can play outside without being run down by vehicles. On the other hand, anthropologists still draw attention to examples which display attitudes at the other extreme—such as the large numbers of disabled children concealed in houses in Peshawar in the 1980s, where neighbours were unaware of their existence. In communities where residences are located close together it is almost impossible to conceal disabled persons for very long, but where dwellings are spaced out, and built for privacy, it may happen.[69] The nature of community life and the built environment of urban and suburban Rome points towards the former for the individuals discussed above.

This begins to provide some new perspectives on what it meant to be 'disabled' in the Imperial Roman world. It offers a route away from the extremes of the spectrum—the ideal of bodily perfection as expressed in classical art at one end, the monstrous at the other—towards the real bodies of the ordinary members of Roman communities. It suggests that responses to bodies that were different might depend upon whether that body was living or dead, and the extent to which it differed from the already disparate bodies of the community, as much as it did upon participation. This counters arguments concerning the capacity of the 'non-able' to fit into the community and to participate as valuable members of society. The people discussed above *were* part of their community, they were in many ways still 'able', suggesting that the ability to contribute in an economic sense was not the primary

[68] Ingstad (1997).
[69] Both the author and the editors thank M. Miles for this eye-witness information.

issue—these people worked and presumably supported themselves and their dependents, hinting at a more complex and nuanced notion of community participation: tolerated in life but not entirely in death? Deformity may well be 'in the eye of the beholder'[70] but Roman eyes will have surveyed and judged a substantial range of disparity and deformity, perhaps only acting upon those assessments when the body in question posed a problem of ontological security for the community, most notably when it was no longer adequately controlled by the person who had once been its subject and consequently required a response by the community at large.

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[70] Garland (1995) 1.

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DISPARATE BODIES IN ANCIENT ARTEFACTS: THE FUNCTION OF CARICATURE AND PATHOLOGICAL GROTESQUES AMONG ROMAN TERRACOTTA FIGURINES*

Alexandre G. Mitchell

In archaeology the term "grotesques" covers an important class of objects (several thousand), generally small in size (height 10–20 cm) and ranging in artistic quality. They show caricatured faces and bodies, physical deformities and human diseases. They were found in various sites throughout the Mediterranean, but especially in Asia Minor and Egypt. The meaning of ancient grotesque terracotta has been debated since the time of Charcot and Régnault from the famous Parisian medical school *La Salpêtriere*, at the turn of the 20th century. They were the first to "diagnose" a pathological inspiration in the grotesquely deformed bodies of these terracotta statuettes.[1] But not all grotesque figurines are pathological, and both their typology and function as objects are difficult issues to tackle. There are three main types of grotesque figurines: stage actors, humorous caricatures and "portraits" of known pathologies. These categories are not air-tight, as the last two types often merge. I hope to present some standard ways of differentiating these various grotesque figurines and in the absence of *proper context* for most of these objects, some solutions regarding their various potential functions.

1. Preliminary Remarks

Coroplasts from archaic Greece down to the late Roman Empire period made a living from mass-producing clay figurines. Grotesque figurines were also small and cheap to produce and purchase, but are very difficult to date precisely as they were mostly found in the 19th century by collectors who were not concerned with their exact provenance. Thus, except when we have an archaeological context or the female figures are given typical 1st or 2nd

* This paper is based on an on-going research project on the function of caricature and pathological grotesque Roman terracotta figurines. I would like to extend my gratitude to Dr. Lorenzo Lorusso, clinical neurologist, Chiari, Italy and Dr. Celso Zappala, gynaecologist obstetrician, University of Torino, Italy for their time, friendship and medical expertise.

[1] See Régnault (1900).

century CE Roman hairstyles or drilled pupils, we tend to give a very wide dating range (3rd century BCE to the 3rd century CE). Although many were found in Egypt and in Alexandria,[2] in particular, this paper focuses on finds from Asia Minor, and especially from Smyrna (among many others found in Tarsus, Ephesus, Priene, Pergamon and Myrina).[3] A large number of figurines are missing their torso and legs. This is an added problem to the lack of context. Many such heads were found by peasants in Smyrna's surrounding countryside, and it would seem they believed that only the heads interested collectors so they probably discarded the torso and members. Even in Smyrna, where so many grotesques were brought to light in the 1890s we are unsure of their exact finding place. The objects are said to come from somewhere on Mount Pagos or other neighbouring hills, probably from tombs and in domestic contexts. Indeed, Rumscheid (2006) has recently shown at Priene that numerous grotesque figurines were found in domestic contexts.[4]

Even though the iconography of terracotta figurines over time and throughout the Mediterranean is vast and varied, most of the artists' stock consisted in idealized types, reproducing famous marble or bronze sculpture. For example, a statuette found in Smyrna (Fig. 1),[5] measuring 0.29 m and dating to the first century BC, is a small-scaled clay imitation of the famous *Diadoumenos* of Polykleitos, a youth tying a fillet around his head after a victory in an athletic context, in ca. 430 BCE. The life-size *Diadoumenos* (Fig. 2),[6] is 1.86 m in height. The Diadoumenos, was evidently still favoured by customers as it was being reproduced in terracotta series, i.e. in large numbers, four hundred years later. Numerous terracotta copies of famous sculptures by Polykleitos, Lysippos, etc. were found throughout the Mediterranean.

The obvious function of this smaller reproduction was decorative, probably for indoor domestic use. It was sold to clients who could not afford to purchase life-size expensive stone, marble or metal copies of famous sculptures. Not only was clay cheap but most of these figurines were not sculpted

2 See Bailey (2008); Fischer (1994), Himmelmann (1983). On the function of the objects see Dunand (2010) 13–15. See also Fjeldhagen (1995) 7–25, s.v. "Dating and Style".

3 On Myrina, see Burr (1934); Kassab (1982); (1987); 1988.

4 See however the interesting point made by Fjeldenhangen 1995: 24 concerning the context of Greco-Roman figurines in Egypt: "… there is no difference between the types of figurines found in tombs, houses or places of worship … it was up to the owner to use this figurine as he thought fit". See also Stevenson (1975) 156–171 on context and chronology.

5 Paris, Musée du Louvre, on loan from New York, The Metropolitan Museum of Art, 32.11.2. Photograph © Alexandre G. Mitchell.

6 Diadoumenos of Polykleitos from Delos [Roman copy of an original ca. 430 BCE], Athens, National Archaeological Museum, 1826. Photograph © Alexandre G. Mitchell. See Stewart (1993) 173, figs. 383–385.

Fig. 1. Small terracotta copy of the diadoumenos.

Fig. 2. Life-size diadoumenos of Polykleitos from Delos.

by hand: they were produced from moulds. Thus we tend to be confronted with series, rather than one-off portraits. Our idealized youth in Fig. 1 was maybe produced from an old mould which was re-used as often as necessary ("surmoulage" in French), or on the other hand a new mould might have been produced for this purpose.

2. Actor Figurines

The first group of grotesque figurines consists in the representation of stage comedy actors.[7] Indeed, Old Comedy terracotta figurines were characterized by standardised caricatured faces, entire head-covering masks often large open mouths to shout one's lines, costume and tights, padded stomach, posterior and fake phallus. But New Comedy (plays by Menander, 330 BCE) actors represented for example by a terracotta figurine from Myrina dating

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7 Among the numerous publications on the subject, see Webster (1960); (1961); (1962); (1971); Bieber (1961); Nesserath (1990); Easterling (2002); Taplin (2007); Hart (2010); Brea (2002); Green (1985); (1995); Khodza (1984).

Fig. 3. New Comedy actor figurine, from Myrina.

from the 1st century BC (Fig. 3),[8] are less exuberant, focusing rather on making the face more expressive. This figurine is the so-called "main slave with curly hair", wearing a cloth around the hips, a himation over the shoulder and arms folded over his bulging stomach. This figure was much appreciated by customers and was also produced on lamps and as attachments to furniture (bronze and clay). The face is caricatured into a stereotyped expression: a mask. It has a snub nose, grimacing large open mouth, furrowed brow, and a short beard. "We know that the features on an ancient Greek mask—as in Greek portraits—did not register fleeting emotions; rather, they conveyed the figure's essential nature, his or her unchanging character and social status".[9]

What was the use or function of grotesque terracotta figurines of stage comedy actors? It is quite likely these figurines amused their viewers but also served as mementos or souvenirs of plays they had either seen, or knew of.[10]

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[8] New Comedy actor figurine, from Myrina, height. 17,5 cm Paris, Musée du Louvre, Myr 317. See also Bieber (1961) fig. 405; Mollard-Besques (1963) 141, 172; Hart (2010) 143 no. 81.

[9] Hart (2010) 44. See also Halliwell (1993) 195–196.

[10] This aesthetic impulse of the ancients may not have been the same in all periods. For the classical period see Green (1994) 72: "gave pleasure and in some way typify the comic stage, types one might buy as souvenirs"; and more recently Roselli (2011) 84.

Fig. 4. Caricatured terracotta head.

3. Caricature and Visual Humour

The second category of grotesques consists in caricatured figurines, visual humour produced to amuse buyers.[11] These figurines are not pathological in nature. Gourevitch describes very aptly the different approaches to these caricatured figurines:[12] "For the historians of medicine, the figurine is a "jovial obese" or maybe "a hydropic"; for art historians the figurine is the caricatured portrait of a Roman magistrate, carrying with decorum an incense box in his left hand".

A clear distinction exists between a pathological grotesque and a caricature: a caricature consists in the *intentional exaggeration* of someone's most characteristic features to produce a comic effect, whereas a pathological grotesque is an *intentional realism* towards the actual representation of a phenomenon: in other words, a portrait. Artists do not follow rules and principles, so number of caricatured aspects co-exist with realistic mimetic pathologies. Indeed, if, as we will show, grotesque imagery was often used for prophylactic reasons, some further caricatured aspects (ears, lips) could only help towards the same goal: apotropaic laughter. A caricatured head from Smyrna (Fig. 4),[13] shows an intentional exaggeration of physical defects such as a very small cranium, a huge and crooked nose, large rubbery lips and jug ears.

[11] On the subject of caricatures and terracotta, see De Francesco (1984); Nachtergael (1990); Boutantin (1999); Bonacasa (2003); La Rosa (2005); Khodza (2006); Laugier (2009). On caricature in Greek vase painting, see Mitchell (2009) 34, 235–279. On theoretical aspects of visual humour see Mitchell (2009) 1–35.

[12] Gourevitch (1987) 357.

[13] Terracotta figurine, height 5.50 cm, Paris, Musée du Louvre, Myr769. 100 BCE–100 CE. Photograph © Alexandre G. Mitchell.

Fig. 5. Parody of a boxer, terracotta figurine.

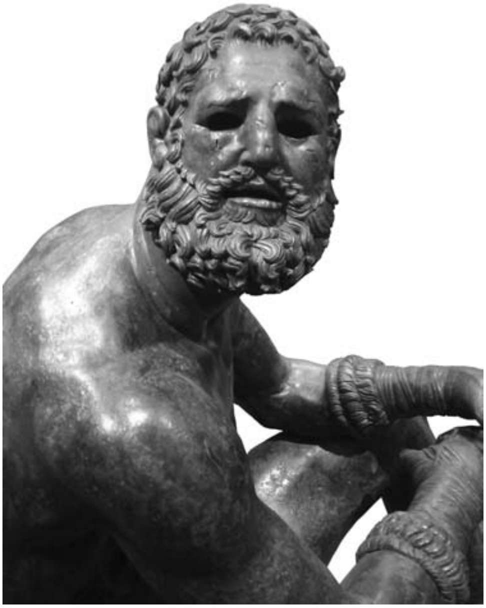

Fig. 6. "Thermae boxer", bronze athlete resting after a boxing match.

Unfortunately we only possess this figurine's head: had we had its entire body an unequivocal humorous interpretation might have been possible. The situation is quite different with another figurine (Fig. 5).[14] It is an excellent parody of a boxer. The famous bronze sculpture of a resting boxer in Rome (Fig. 6),[15] shows the athlete's muscular body but also the typical long-term injuries from being repeatedly hit typical in this sport: broken nose, swollen eyes ("mouse under the eye") and "cauliflower ears" (the boxer's *othematoma* or according to Tertullian: *aurium fungi* "mushroom ears").[16] In contrast, the small terracotta in Paris dating to the 3rd century CE (Fig. 5), shows a scrawny, caricatured boxer, recognizable from his typical gloves made of leather straps that encircled the hands, wrists and forearm, but there ends

[14] Terracotta figurine, Paris, Musée du Louvre, CA 1608, Ht. 16 cm. Photograph © Alexandre G. Mitchell.

[15] So-called "Thermae boxer": athlete resting after a boxing match. Bronze, Greek artwork of the Hellenistic era, 3rd–2nd centuries BC. Rome, Palazzo Massimo alle Terme, Inv. 1055. Height 1.20 m Photograph © Alexandre G. Mitchell.

[16] On this injury, see Gourevitch (1987) 160; Grmek, Gourevitch (1998) 79; see an excellent survey of medical injuries linked to boxing: Unterharnscheidt (2003) 150–151. For ancient artefacts, see also Benedum (1968).

the comparison. This 'boxer' lacks the muscular and athletic body of a boxer and not only are his ears undamaged, they are detached and their cartilage clearly defined. This is a straightforward caricature, and an ancient joke. One should not be surprised to find a few humorous caricatures among the many copies of a famous statue:[17] Humour in Greek and Roman art is now well-attested.[18] This style of caricature is also found in ancient Egyptian art,[19] which might explain the origin for the numerous Hellenistic caricatures found in Alexandria (dwarfs, hunchbacks, phallic grotesque figures), Memphis and the Fayoum. A number of scholars have also postulated that there may have been a further cross-cultural exchange which would explain the many grotesques found in Asia Minor.[20] Yet, we found caricature in vase-paintings and terracotta figurines already in the 5th century BCE in mainland Greece, and the Alexandrian origin cannot explain the pathological vein in Smyrna.

Caricature and visual humour in terracotta figurines may have served various functions, but mostly they would have been produced to amuse or bringing people closer together by mocking certain faults or differences.[21]

4. Pathological Grotesques

The third category of grotesque figurines and the main focus of this paper are the so-called pathological grotesque figurines, i.e. images that show severe pathologies that border on the grotesque. This is a field where art history, archaeology and medicine come together to analyse the objects, in an attempt to understand, among other things, their function. The union of medicine and archaeology is far from being a new one. The first "pathological" terracotta from Asia Minor collected by Mr Paul Gaudin at the end of the 19th century came rapidly to the attention of the medical team of the Salpêtrière in Paris. This included such eminent medical doctors as Jean-Martin Charcot, Henry Meige and Felix Régnault (who was also an amateur

[17] Compare also a caricature of the famous sculpture of the late Hellenistic age, *Lo spinario*, a bronze sculpture which shows a young idealised boy pulling out a thorn from the sole of his foot. The caricature (Terracotta Figurine, height. 17 cm, from Priene, house 33, 2nd century BCE. Berlin, Altes Museum, TC8626) is striking: to mock the Greek facial traits and body type of the original, the boy on the left is given the traits of a caricatured African slave boy.

[18] Greek art: see Mitchell (2009); Roman art: Clarke (2007).

[19] Note for example the numerous grotesque figurines of dwarfs and Bes in particular (see Lunsingh (1987)). For an overall look at visual humour in ancient Egypt, see Houlihan (2001).

[20] See Dunand (1990) 211–212, 267–276; Ashton (2008) 109–111.

[21] On humour as a means to achieve social cohesion, see Mitchell (2009) 300–315.

Fig. 7. Realistic portrait of old age, terracotta figurine.

prehistorian).[22] Stevenson (1975) was the first to study a large corpus of pathological grotesques and his methodologies and insights are invaluable to understand the importance of these objects. The interdisciplinary team of the classicist D. Gourevitch and medical doctor/historian of medicine M. Grmek published widely on paleopathology and *iconodiagnosis*.[23] Both Stevenson and Gourevitch warn us against the dangers of pseudo-pathology, the danger of reading too much into ancient art: “The interpretation of ancient pathologies is not only extremely complex but fraught with hazards such as provable errors in diagnosis. Even when dealing with organic remains such as mummies or skeletal matters …”[24] Yet, taking in account the obvious shortcomings of *iconodiagnosis*, and the fact that the principles of modern medicines and its working concepts are utterly different from those in antiquity, it is still indispensable to consult medical doctors when analysing pathological grotesques.

Before we can properly understand the function of pathological grotesques, one must first delve into the art of social realism: a terracotta figurine (Fig. 7),[25] originally from Smyrna shows an elderly woman. The old woman’s torso is bent forwards. She seems to have a pot-belly, which is striking in con-

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[22] See Martinez (2009) 14–19, 100–103; Régnault (1900); (1909a); (1909b); (1909c). Charcot was also a decent caricaturist who used caricature as a method of clinical evaluation: through the exaggeration of certain specific details, one can identify the mechanisms of a neurological disorder.

[23] See for example Gourevitch (1987); Grmek, Gourevitch (1998).

[24] Stevenson (1975) 104.

[25] Terracotta figurine, Musée du Louvre, CA 768, Ht. 6.5 cm. Photograph © Alexandre G. Mitchell. See Besques 1972: pl. 233.d.

trast to her bony chest and sagging breasts, but in reality, at such a great age, her muscle mass and particularly her abdominal muscles would have greatly diminished; thus, there is hardly anything but her skin to keep her internal organs in place. She is sitting, in the nude; her wide-open vulva is visible. There are traces of red paint and gold leaf on the figurine. This is an accurate representation of advanced old age, without any pathology, nor caricature. If we had at our disposal her head, arms and legs, further signs may have helped us interpret this object definitively. Maybe the added red paint (apotropaic colour) and obscene wide-open vulva (such as Baubo and other fertility amulets) point to an apotropaic function, but this cannot be ascertained.

Why show a social realistic portrait? Why show the bodily decrepitude of advanced old age? The aesthetic impulse of the ancients was not only focused on rational idealisations of perfection, but also on a morbid curiosity for the unnatural and the grotesque.[26]

What is important to note is that most of the representations described as pathological grotesques are not fully caricatures but portraits of the result of real diseases with some added caricature at times; all of which clearly demonstrates a distinct interest in showing diseases: chondrodystrophy, rickets, Pott's disease, spinal sternum deformities, goitre, obesity, hermaphrodites, pituitary pathologies (acromegaly, gigantism), hydrocele, and many more are clearly portrayed in terracotta figurines.

A male figurine in the Louvre (Fig. 8),[27] displays a number of deformities. At first glance we have a hunchback dwarf with his head dug in between the shoulders. His ribs are pushed forward, and his hips deformed. He is bald, his nose is large and hooked. His lips are very swollen. There have been various interpretations of this figurine, but they tend to see the figurine as suffering from acromegaly,[28] an uncommon chronic metabolic disorder in which there is too much growth hormone and the body tissues gradually enlarge, on top of the other deformities. Yet there are a few problems with this interpretation. First, his head is anatomically placed where his neck should be, at the level of the clavicle, the insertion of the neck's trapezius muscle. Secondly, the age represented in the face, is far older than the muscular upper body. A man with such deformed hips and weak legs, could not have carried the weight of his upper body and still reached an old age. Thirdly, even if we imagine that

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[26] Still today, museums like the Hunterian Museum in London both repulses and intrigues its non-medical visitors, with its collection of anatomical specimens assembled by 18th century surgeon John Hunter (pickled embryos, diseased organs in jars, etc.).

[27] Terracotta figurine, height. 8 cm, Paris, Musée du Louvre, MNC266 100 BC–100 AD. Photograph © Alexandre G. Mitchell. See also Besques 1972: D1176, pl. 235.e.

[28] Grmek, Gourevitch (1998) 200.

Fig. 8. Hunchback dwarf, terracotta figurine.

Fig. 9. Cleft lip, terracotta head.

his lips are swollen because of an allergic reaction, why is the line joining them missing? This figurine is a mixture of closely observed pathologies and unrealistic aspects.

A small head from Smyrna (Fig. 9),[29] shows a man who may be suffering from a cleft lip. This congenital deformity caused by abnormal facial development during gestation is well described by T. Skoog discussing a small terracotta head in the museum in Corinth.[30] As far as the head from Smyrna is concerned, there may also be a lop-sided right side of the face which might be explained by a form of paralysis (Bell's palsy, etc.), often noticeable by a drooping eyelid,[31] but the arch over the eye of the figurine is not muscle but bone, thus an ictus is unlikely to have occurred.

[29] Terracotta head, Brussels, Musées Royaux d'Art et d'Histoire, M370. Photograph © Alexandre G. Mitchell (courtesy of Dr. Natacha Massar).

[30] Terracotta head, Corinth, Archaeological museum, T91. Skoog (1969).

[31] On a representation of a rare neurological condition called *hemifacial spasm* (with a different mechanism than paralysis) in an ancient terracotta head, see Devoize 2011.

Fig. 10. Hunchback dwarf, terracotta figurine.

Above the "furrowed brow" there seems to be a scar which is a useful marker to compare the cranium to the maxillofacial area. In a human the maxillofacial area, composed of the mouth, jaw, face, is smaller than the cranium. But in an ape, the two zones are almost identical in size. We have here a human face elongated into that of an ape's. Once again, we have a mixture of various potential pathologies and unrealistic deformities.

The next figurine, also from Smyrna (Fig. 10),[32] shows a crowned dwarf with a hump on his back, a gaping mouth and a prominent rib cage. This deformity may be caused by Pott's disease.[33] His gaping mouth reminds the viewer of the Roman "Stupidus" theatrical character. Three important details make this "pathological" grotesque something more than a medical showcase: his enormous phallus, the suspension hole in his back and traces of red paint. Traces of red paint have been found on many pathological grotesques and is the apotropaic colour *par excellence* throughout antiquity and to this day in many parts of the world.[34] As far as the large phallus is concerned, it was "talismanic in itself".[35] And, to quote Gourevitch:[36] "the frequency of hunchbacks in ancient art is not as much caused by the real frequency of

32 Terracotta figurine, from Smyrna, Ht. 7.5 cm, Musée du Louvre, CA5190. 2nd century BCE. Photograph © Alexandre G. Mitchell. See Besques (1972) D1183, pl. 236.a.

33 On Pott's disease, see Grmek, Gourevitch (1998) 217–219.

34 Dundee (1981) (red paint) 61, 63; (red string/thread/ribbons/bows) 110, 126–128, 135, 141, 146, 149, 153, 176, 197, 216; ("anything red") 128, 136, 175, 213, 218.

35 Stevenson (1975) 47.

36 Grmek, Gourevitch (1998) 214.

Fig. 11. (Former) Ex-voto collection, Archaeological museum of Corinth.

this pathological state than the magical meaning that is attributed to them … to reinforce this apotropaic effect, hunchbacks in good-luck artefacts were often given a huge phallus." A suspension hole implies that the figurine was designed to be hung from a hook on a wall for example, like an amulette.

Of course one could argue there was an aetiological reason for finding so many deformities in art: "vitamin deficiency, lack of sanitation, pollution and communicable diseases which are cumulative in their effects and may be considered the causal factors for deforming diseases."[37] Besides the ridiculous dancing dwarfs found at banquets, we know that dwarfs also served at times as pet companions to rich masters. This may have been a fashion statement on their part, or the presence of the deformed being at their side may have been an example of their publicised self-affirmation of luxury and wealth.[38] But the objects may also have been produced as protective amulets against such diseases.

Maybe so many pathological grotesques were found in Smyrna because of its famous ancient school of medicine. Was there a medical or therapeutic function for these representations? We find many anatomical ex-voto (gifts) to the god Asklepios to thank or pray for a medical recovery in his santuaries.[39]

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37 Stevenson (1975) 113.

38 See Giuliani (1987). See also Laes (2011).

39 See Charlier (2008); Decoufle (1964); Fenelli (1975); (1992); Girardon (1993), Potter (1985); Turfa (1986); 1994 and Baggieri (1996) on anatomical votives, and especially Baggieri (1996) 34–35 on how to read anatomical votives (dedicating ear/eye/mouth to the god so that he can hear/see/speak with the sufferer).

Fig. 12. Nineteenth century wax model of a woman, Torino.

The photograph (Fig. 11) of the former presentation of anatomical ex-voto from the Asklepeion of Corinth in the archaeological museum of Corinth, shows brain, legs, feet, ears, breasts, hands, eyes, penises, etc. Yet, as Stevenson reminds us "none of the extent and well-published examples show any pathological deformities".[40] Furthermore, no pathological grotesque terracotta figurines were found in the context of healing sanctuaries where the great medical schools were also established in antiquity (Kos, Epidaurus, Corinth, Alexandria, Pergamon, Cnidus, Ephesus or Smyrna).

Some scholars have wondered whether the grotesques were used as teaching material, to show young students the anatomy of deformities, modelling in clay real patients suffering from these various deformities,[41] like the wax models of the recent past (Fig. 12).[42]

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[40] Stevenson (1975) 100. There may be a couple of rare exceptions, such as a hand with a lump in the Corinth Museum. See C. Roebuck, *The Asklepieion and Lerna, Corinth* XIV (1951) pl. 40, no. 63.

[41] Laumonier (1946) 318; Uhlenbrock (1990) 110.

[42] Wax model of a woman by Francesco Calenzoli, 1830–1831, Torino, Il Museo di Anatomia Umana Luigi Rolando dell'Università di Torino. Photograph © Alexandre G. Mitchell (courtesy of Prof. G. Giacobini).

Fig. 13. Suffocating man, terracotta figurine.

Fig. 14. Suffocating man, copper alloy figurine.

But it would seem that there was no ancient equivalent to modern anatomy classes nor to the special role of wax model specialists who were often versed in the study of medicine themselves, if not anatomy specialists themselves. Smyrna had a famous and advanced Erasistratian school founded by Hikesios in the 2nd century BCE but its teachings had none of the systematic aspects which we know of today when using such models.[43] Were they medical memento similar in nature to the terracotta reproductions of famous idealised sculpture or of actors of stage comedy? Were they part of a personal medical 'cabinet of curiosities' or a reminder of a physician's medical speciality? Until new excavations with proper contextual evidence enlighten the subject, these last questions will remain unanswered.

We come now to some of a key series which has been under scrutiny since their discovery. A figurine in Paris (Fig. 13),[44] shows a naked man holding his hands to his throat, in a gesture of suffocation. His large phallus was

[43] See Verbanck-Piérard (1998) 202.

[44] Terracotta figurine, Paris, Musée du Louvre, CA5131. Photograph © Alexandre G. Mitchell. See Besques 1972: D1211, pl. 242.b. See on the subject: Grmek, Gourevitch (1998) 159–160.

Fig. 15. Suffocating man, terracotta figurine.

removable. Two similar figurines are also of interest, a copper alloy figurine in Athens (Fig. 14),[45] and a terracotta figurine in Brussels (Fig. 15).[46] Some scholars imagined he suffered from tuberculosis, others that the ingestion of a foreign object had blocked his breathing. One could even imagine a form of autoerotic asphyxiation, as it is a known fact that strangulation increases the sense of pleasure and possibly explains the enlarged penis. Yet, the penis is too large to be in proportion with the rest of the body, and it is not in erection in these figures, whereas asphyxiation by hanging provokes the so-called "death erection". These figures are found in large quantities, and not only in terracotta.[47] Many have a suspension hole in the back like Fig. 14,[48] and some have visible traces of red paint.

[45] Copper alloy figurine, Athens, National Archaeological Museum, 447. Photograph © Alexandre G. Mitchell.

[46] Terracotta Figurine, Brussels, Musées Royaux d'Art et d'Histoire, A1502. Photograph © Alexandre G. Mitchell.

[47] See Grmek, Gourevitch (1998) 159–160 for references to different versions of this personification in a variety of materials, including gold amulettes.

[48] E.g. Musée du Louvre, CA 4848 (Mollard-Besques (1972) D884, pl. 163.a). Louvre, MNC 267, MYR707 (Mollard-Besques (1972) D1180, pl. 235d). Louvre, CA5135 (Mollard-Besques (1972) D1181, pl. 235g).

Fig. 16. Suffocating personification of envy, Roman mosaic

This series should be compared to a similar figurine from Smyrna, now in Leiden.[49] It is janiform and painted entirely in red: one side shows a man suffocating and the other a female figure with long sagging breasts, opening her chest, just like a figure in the Louvre.[50] Clearly they are related and show that this is not a scene of surgery: it is apotropaic in nature.

In the late 1950s a mosaic floor was uncovered in a Roman villa in Skala on the island of Cephalonia (Fig. 16).[51] It shows a young man suffocating in the same stereotypical way as the figurines, and attacked by leopards. The figure is identified in the inscription below as a personification of Envy (*Phthonos*). Clearly the figure is suffocating with jealousy.[52] This was the key image that unlocked the meaning of the many terracotta figurines showing the same personage. Our terracotta figurines must be interpreted as personifications

[49] National Museum of Antiquities, LKA 1176, Leyenaar-Plaisier (1979) no. 355, pl. 55.

[50] Female terracotta figurine, Musée du Louvre, CA5160. See Grmek, Gourevitch (1998) 191.

[51] Photograph © Roy Stead seen on (http://www.flickr.com/photos/that_james/4765997848/). On this mosaic and the personification of Phthonos, see Dunbabin (1983).

[52] According to Slane (1993) 495: "The envious man was thought to choke or burst with his suppressed and frustrated rage."

Fig. 17. Suffocating man, terracotta moldmade vessel.

of the Evil eye. The notion of the evil eye is based on envy (Greek: "phthonos", Latin: "invidia"), and envying is to covet by looking.[53] The figurines probably hung near house thresholds as an apotropaic symbols.

Most scholars agree on the talismanic properties of the phallus,[54] of fertility and prosperity and a protection against the evil eye and evil spirits. Phallic amulets are ubiquitous in the Roman world, from good luck charms such as the terracotta plaque on a bakery in Pompeii that reads *hic habitat felicitas* ("Here resides happiness"), to the numerous tiny (4–6 cm) bronze phallic amulets tied around the necks of babies and infants.[55] Noise was also a powerful charm. The dual magical power of the phallus and noise is seen in Roman bronze phallic amulets with little bells, called *tintinnabula*.[56]

53 See Plutarch, *Quaestiones convivales* 664; Pliny the Elder, *Naturalis Historia* 7, 16–17. On the evil eye and its representation on Greek vases, see Mitchell (2009) 38–40: See also Engemann (1975); Clarence (1976); Dickie (1991). See Konstan (2006) on emotions in antiquity.

54 Laumonier (1956) 253: "The main use of these objects were to avert the Evil Eye. This is why they are found in the tombs, the houses and sometimes also in sanctuaries." Slane (1993) 486: "both the phallus and the motif of self-strangulation or choking are used to avert the Evil Eye of Envy."

55 See Dasen (2003).

56 Some terracotta figurines had a small stone that moved freely inside them which made noise and according to Laumonier (1956) 11 may be a further proof of apotropaic *crepitaculum*. See also Delatte (1954) and Herzog-Hauser, G., RE VIA, cols. 1406–1410 (*Tintinnabulum*).

Fig. 18. Evil eye under attack, Roman mosaic, Antioch.

Fig. 19. Lucky hunchback, bronze statuette.

The apotropaic function of the choking figures was unequivocally confirmed by a terracotta mouldmade vessel in Corinth (Fig. 17).[57] "Below the mouth of the vessel are a human head and torso. The bottom consists of a phallus and wings … The left arm and hand of the figure stretch up to clutch at the throat slightly to the right of the chin … The face is rendered in some detail; the features are distorted and grotesque."[58]

Dwarfs,[59] large phalluses and hunchbacks were not the only ways of fighting the evil eye as witnessed on a mosaic from the so-called House of the Evil Eye at Antioch-on-the-Oronte (Fig. 18).[60] A large eye is being attacked and pierced by a trident, a glavius, a scorpion, a bird, a leopard and a dog. A hunchback has turned its back on the evil eye as if to avoid it harmful gaze (he wears a mask) but, more likely to show it his hump. Because he faces forward, his gigantic phallus twists backwards to point at the evil eye.

And, it is only thanks to the last mosaic that we can understand the meaning of this final pathological grotesque (Fig. 19),[61] a so-called "dancing" hunchback. He was identified as a dancing hunchback because of the movements he seems to be making and the fact that his phallus is flying backwards. In reality the phallus is twisted backwards to follow the same

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57 Terracotta moldmade vessel, Knidian fabric, L. 23.8 cm. Corinth, Archaeological Museum, C-27–37. Photograph after Slane (1993) pl. 85.

58 Slane (1993) 484–485.

59 See also Dasen 2009 on the apotropaic aspects of pygmies.

60 Roman mosaic, Antioch, House of the Evil Eye, 2nd century CE. See Levi (1947) 28–34, pl. 4.

61 Bronze statuette, 2nd century BCE. Phoenix gallery, Geneva. See their catalogue *Exotics of the Classical World. L'exotisme dans le monde classique* (Geneva, 2009).

"line of sight" as the hump on his back. This good luck charm was in fact probably placed in a household, facing a wall, with its back turned to the visitors, and potentially, in the direction of the evil eye.

Thus, grotesque terracotta figurines have had a number of functions: as a memento of stage comedy actors or as comic relief, as caricatures. Pathological grotesques may have titillated the morbid curiosity of the mob, as portraits of the grotesque realities of mother nature but they probably had a more 'serious' function as amulets offering protection against the evil eye; just like today's traditional good luck charms with various deformities such as hunchbacks (Napolitan Gobbo key rings and wax figurines of Nano, Lebbroso, Storpio, Guercio).

But the representations are often medically accurate, and whatever their intended function, they offer a wealth of knowledge to modern doctors as well as to historians of medicine. Hippocrates famously said "Life is short, [the medical] art long, opportunity fleeting, experiment treacherous, judgment difficult."[62] One could add, "so is archaeology", in its slow process of gathering and analysing the remains of ancient human activity in order to understand better where we come from.

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